## United States Bankruptcy Court Eastern District of New York

IN RE:		Case No.
Manzo, Robert P & Manzo, Grace C		Chapter 7
	Debtor(s)	
	VERIFICATION OF CRED	ITOR MATRIX
The above named debtor(s) or atto correct to the best of their knowled	•	fy that the attached matrix (list of creditors) is true and
Date: <b>June 24, 2016</b>	/s/ Robert P Manzo Debtor	
	/s/ Grace C Manzo Joint Debtor	
	/s/ Kevin Zazzera Attorney for Debtor	

Bk Of Amer Po Box 982238 El Paso, TX 79998

Bk Of Amer Po Box 982235 El Paso, TX 79998

Ccs/first National Ban 500 East 60th St N Sioux Falls, SD 57104

Chase Card Po Box 15298 Wilmington, DE 19850

Comenity Bank/express 4590 E Broad St Columbus, OH 43213

Credit One Bank Na Po Box 98872 Las Vegas, NV 89193

Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850 Dsnb Macys Po Box 8218 Mason, OH 45040

Gap/
P O Box 960017 Synchrony Bank
Orlando, FL 32896

Sears/cbna 133200 Smith Rd Cleveland, OH 44130

Sears/cbna Po Box 6282 Sioux Falls, SD 57117

Syncb/old Navy Po Box 965005 Orlando, FL 32896

Syncb/toysrusdc Po Box 965005 Orlando, FL 32896

Syncb/walmart Po Box 965024 El Paso, TX 79998 Syncb/walmart Dc Po Box 965024 Orlando, FL 32896

Td Bank Usa/targetcred Po Box 673 Minneapolis, MN 55440

Thd/cbna Po Box 6497 Sioux Falls, SD 57117

Wells Fargo Hm Mortgag 8480 Stagecoach Cir Frederick, MD 21701

Filed 06/25/16 Case 1-16-42819-cec Doc 1 Entered 06/25/16 20:59:40

B201B (Form 201B) (12/09)

### **United States Bankruptcy Court Eastern District of New York**

IN RE:	Case No
Manzo, Robert P & Manzo, Grace C	Chapter 7
Debtor(s)	•

# CEDTIFICATION OF NOTICE TO CONSIMED DEPTOD(S)

	2(b) OF THE BANKRUPTCY CODE	
Certificate of [No	n-Attorney] Bankruptcy Petition Preparer	
I, the [non-attorney] bankruptcy petition preparer signotice, as required by § 342(b) of the Bankruptcy Co	ning the debtor's petition, hereby certify that I delivered de.	d to the debtor the attached
Printed Name and title, if any, of Bankruptcy Petition Address:	petition preparer the Social Secur principal, respor the bankruptcy p	number (If the bankruptcy is not an individual, state ity number of the officer, asible person, or partner of petition preparer.)
X Signature of Bankruptcy Petition Preparer of officer,	(Required by 11 principal, responsible person, or	U.S.C. § 110.)
partner whose Social Security number is provided about		
	Certificate of the Debtor	
I (We), the debtor(s), affirm that I (we) have received	and read the attached notice, as required by § 342(b) of	of the Bankruptcy Code.
Manzo, Robert P & Manzo, Grace C	X /s/ Robert P Manzo	6/24/2016
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)		6/24/2016
	Signature of Joint Debtor (if any)	Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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Fill in this inform	nation to identify your c	ase:		
Debtor 1	Robert P Manzo			
	First Name	Middle Name	Last Name	
Debtor 2	Grace C Manzo First Name	Middle Nome	Look Nome	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	EASTERN DISTRI	CT OF NEW YORK	
Case number				
(if known)				Check if this is an amended filing
	nt of Intentio		iduals Filing Under Chapte	er 7 12/15
	vidual filing under chap	-	out this form if:	
you have lease You must file this	ver is earlier, unless the	nd the lease has not thin 30 days after yo	expired. ou file your bankruptcy petition or by the date set f time for cause. You must also send copies to the c	
	ople are filing together e the form.	in a joint case, both	are equally responsible for supplying correct info	rmation. Both debtors must sign
	nd accurate as possible our name and case num		eeded, attach a separate sheet to this form. On the	top of any additional pages,
Part 1: List Yo	our Creditors Who Have	Secured Claims		
1. For any creditor	-	rt 1 of Schedule D: (	Creditors Who Have Claims Secured by Property (	Official Form 106D), fill in the
Identify the cre	editor and the property th	at is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
	/ells Fargo Hm Mort	gag	☐ Surrender the property.	■ No
name:			Retain the property and redeem it.	□Yes
Description of property	residence: 11 Shir Staten Island, NY 1		<ul><li>Retain the property and enter into a Reaffirmation Agreement.</li><li>Retain the property and [explain]:</li></ul>	Li les
securing debt:				_
Dort O. Liet Vo	un Unavaired Dersand	Dreverty Lesses		
For any unexpired the information be	elow. Do not list real es	se that you listed in tate leases. Unexpir	Schedule G: Executory Contracts and Unexpired red leases are leases that are still in effect; the leas stee does not assume it. 11 U.S.C. § 365(p)(2).	
Describe your ur	nexpired personal prop	erty leases		Will the lease be assumed?
				_
Lessor's name:	and			□ No
Description of lease Property:	5 <del>5</del> 4			☐ Yes
				· <del></del>
Lessor's name:	1			□ No
Description of leas Property:	sed			☐ Yes
Lessor's name:				□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

	otor 1 Manzo, Robert P & Manzo, Grace C	Case number (if known)
De	scription of leased	
Pro	perty:	☐ Yes
	sor's name:	□ No
	scription of leased perty:	☐ Yes
	sor's name:	□ No
	scription of leased perty:	☐ Yes
	sor's name:	□ No
	scription of leased perty:	☐ Yes
	sor's name:	□ No
	scription of leased perty:	☐ Yes
Pa	t 3: Sign Below	
	er penalty of perjury, I declare that I have indicated my intention a perty that is subject to an unexpired lease.	pout any property of my estate that secures a debt and any personal
Χ	/s/ Robert P Manzo	X /s/ Grace C Manzo
	Robert P Manzo	Grace C Manzo
	Signature of Debtor 1	Signature of Debtor 2
	Date	Date June 24, 2016

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK	-	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

### Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exan licen Bring iden	e the name that is on government-issued ure identification (for nple, your driver's use or passport).  g your picture tification to your meeting the trustee.	Robert First name  P Middle name  Manzo Last name and Suffix (Sr., Jr., II, III)	Grace First name  C Middle name  Manzo  Last name and Suffix (Sr., Jr., II, III)
2.	used Inclu	other names you have d in the last 8 years ade your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer vification number	xxx-xx-1057	xxx-xx-5837

	otor 1 otor 2 Manzo, Robert P	& Manzo, Grace C	Case number (if known)		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live		If Debtor 2 lives at a different address:		
		11 Shirra Avenue Staten Island, NY 10314 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Richmond County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code	County  If Debtor 2's mailing address is different from yours, fill it here. Note that the court will send any notices to this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one:  ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)		

	otor 1 otor 2 Manzo, Robert P 8	& Manzo, Grace	<b>c</b>	Case numb	er (if known)
Par	Tell the Court About Y	our Bankruptcy Ca	ase		
7.	The chapter of the Bankruptcy Code you are choosing to file under		orief description of each, see <i>Notic</i> the top of page 1 and check the ap		12(b) for Individuals Filing for Bankruptcy (Form
	Choosing to the under	■ Chapter 7			
		☐ Chapter 11			
		☐ Chapter 12			
		☐ Chapter 13			
8.	How you will pay the fee	about how your attorn pre-printed a	ou may pay. Typically, if you are pay ey is submitting your payment on you ddress. y the fee in installments. If you c	ving the fee yourself, you may our behalf, your attorney may	k's office in your local court for more details pay with cash, cashier's check, or money order. pay with a credit card or check with a tach the Application for Individuals to Pay The
		I request the not required your family s	to, waive your fee, and may do so o	only if your income is less than see in installments). If you choo	e filing for Chapter 7. By law, a judge may, but is a 150% of the official poverty line that applies to use this option, you must fill out the <i>Application</i> a your petition.
9.	Have you filed for bankruptcy within the last	■ No.			
	8 years?	☐ Yes.			
		District	V	Vhen	Case number
		District	V	Vhen	Case number
		District	V	Vhen	Case number
10.	Are any bankruptcy cases pending or being filed by	■ No			
	a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.			
		Debtor			Relationship to you
		District	V	Vhen	Case number, if known
		Debtor			Relationship to you
		District	V	Vhen	Case number, if known
11.	Do you rent your residence?	■ No. Go to	line 12.		
	. Joinottoo .	☐ Yes. Has ye	our landlord obtained an eviction ju	dgment against you and do yo	ou want to stay in your residence?
			No. Go to line 12.		
			Yes. Fill out <i>Initial Statement Abo</i> bankruptcy petition.	out an Eviction Judgment Aga	inst You (Form 101A) and file it with this

	tor 1 tor 2 Manzo, Robert P 8	& Manzo	, Grace	С	Case number (if known)		
Par	Report About Any Bus	sinesses \	You Own	as a Sole Proprieto	or		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	■ No. Go to Part 4.				
		☐ Yes.	Name	and location of bus	iness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any			
	If you have more than one sole proprietorship, use a		Numb	er, Street, City, Stat	e & ZIP Code		
	separate sheet and attach it to this petition.		Chec	k the appropriate box	k to describe your business:		
					ess (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))		
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set app. lines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statem titions, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the proc				
	For a definition of small	■ No.	I am r	not filing under Chap	ter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	Report if You Own or	Have Any	Hazardo	us Property or Any	Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable		What is	the hazard?			
	hazard to public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number, Street, City, State & Zip Code		
					runnen, Sueet, Oity, State a Zip Code		

Debtor	1	
Dehtor	2	

Manzo, Robert P & Manzo, Grace C

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Case	mum	000	(IŤ	known

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or makinç rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

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Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	otor 1 otor 2 Manzo, Robert P	& Manzo,	Grace C	Case nu	mber (if known)		
Par	t 6: Answer These Questi	ons for Re	porting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."				
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily business for a business or investment or thro		ots that you incurred to obtain money or investment.		
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe that	t are not consumer debts or busine	ess debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	to line 18.			
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?				
	administrative expenses		■ No				
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes				
18.	How many Creditors do you estimate that you	<b>1</b> -49		<u> </u>	<u></u> 25,001-50,000		
	owe?	□ 50-99 □ 100-19	20	□ 5001-10,000 □ 10,001-25,000	☐ 50,001-100,000 ☐ More than100,000		
		☐ 200-99		10,001 20,000	in More than 100,000		
19.	How much do you estimate your assets to	□ \$0 - \$50,000 □ \$50,001 - \$100,000		□ \$1,000,001 - \$10 million	\$500,000,001 - \$1 billion		
	be worth?		001 - \$100,000 001 - \$500,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
			001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion		
20.	How much do you	□ \$0 - \$5		☐ \$1,000,001 - \$10 million	\$500,000,001 - \$1 billion		
	estimate your liabilities to be?	_ ` ′	01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$100 million	☐ More than \$50 billion		
Par	t 7: Sign Below		<b>.</b>				
	you	I have eva	amined this petition, and I declare un	der penalty of perjury that the infor	mation provided is true and correct		
	you		•		·		
			chosen to file under Chapter 7, I am ode. I understand the relief available		ible, under Chapter 7, 11,12, or 13 of title 11, United to proceed under Chapter 7.		
			ney represents me and I did not pay ined and read the notice required by		ot an attorney to help me fill out this document, I		
			relief in accordance with the chapte		·		
		case can			or property by fraud in connection with a bankruptcy oth. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Manzo		
		Robert	P Manzo e of Debtor 1	Grace C Mail Signature of De	nzo		
		Signature	OI DEDIOI I	Signature of Di	GDIOI Z		
		Executed	on June 24, 2016 MM / DD / YYYY	Executed on	June 24, 2016 MM / DD / YYYY		

Debtor 1 Debtor 2  Manzo, Robert P	& Manzo, Grace C	Case	e number (if known)
For your attorney, if you are represented by one	Chapter 7, 11, 12, or 13 of title 11, United States person is eligible. I also certify that I have deliver	Code, and have explained to the debtor(s) the notice	ormed the debtor(s) about eligibility to proceed under the relief available under each chapter for which the se required by 11 U.S.C. § 342(b) and, in a case in y that the information in the schedules filed with the
an attorney, you do not need to file this page.	petition is incorrect.  /s/ Kevin Zazzera  Signature of Attorney for Debtor	Date	June 24, 2016 MM / DD / YYYY
	Kevin Zazzera Printed name Kevin B. Zazzera, Esq.		
	182 Rose Ave Ste 3		
	Staten Island, NY 10306-2900  Number, Street, City, State & ZIP Code  Contact phone	Email address	kzazz007@yahoo.com
	Bar number & State		

	rmation to identify your case	e and this filing:			
Debtor 1	Robert P Manzo				
Dobtor 2	First Name	Middle Name Last Name			
Debtor 2 (Spouse, if filing)	Grace C Manzo First Name	Middle Name Last Name			
United States B	Bankruptcy Court for the: EA	ASTERN DISTRICT OF NEW YORK			
Case number					☐ Check if this is an amended filing
					<b>3</b>
Official Fo	orm 106A/B				
Schedu	ile A/B: Prope	rty			12/15
think it fits best. information. If mo Answer every que	Be as complete and accurate as ore space is needed, attach a se estion.	ms. List an asset only once. If an asset fits in more s possible. If two married people are filing together, eparate sheet to this form. On the top of any addition and, or Other Real Estate You Own or Have an Intere	both are equally respornal pages, write your na	nsible for supp	olying correct
1. Do you own or	r have any legal or equitable into	erest in any residence, building, land, or similar pro	perty?		
□ No. Go to Pa	ort ?	, , ,			
_	e is the property?				
— 100. William	o to the property.				
1.1		What is the property? Check all that apply			
	ss, if available, or other description	Single-family home			ms or exemptions. Put claims on <i>Schedule D:</i>
	ss, if available, or other description	_	the amount	of any secured	
	ss, if available, or other description	☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative	the amount	of any secured	claims on Schedule D:
	ss, if available, or other description	☐ Single-family home ☐ Duplex or multi-unit building	the amount Creditors W  Current val	of any secured ho Have Claim ue of the	claims on Schedule D: s Secured by Property.  Current value of the
	is, if available, or other description  State ZIP C	□ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land	the amount Creditors W  Current val entire prope	of any secured ho Have Claim ue of the	claims on Schedule D: s Secured by Property.  Current value of the portion you own?
Street addres		Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land  Investment property  Timeshare  Other	Current val entire prope \$20  Describe the (such as fewers)	of any secured the Have Claim ue of the erty?  0,000.00  ne nature of you simple, tena	claims on Schedule D: s Secured by Property.  Current value of the portion you own?
Street addres		Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land  Investment property  Timeshare	Current val entire prope \$20  Describe the (such as fewards) a life estate	of any secured the Have Claim ue of the erty?  0,000.00  ne nature of you simple, tena	claims on Schedule D: s Secured by Property.  Current value of the portion you own? \$200,000.00  our ownership interest ncy by the entireties, or
Street addres		Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land  Investment property  Timeshare  Other  Who has an interest in the property? C	Current val entire prope \$20  Describe the (such as fewards) a life estate	of any secured the Have Claim ue of the erty?  0,000.00  ne nature of your estimates in the simple, tena to, if known.	claims on Schedule D: s Secured by Property.  Current value of the portion you own? \$200,000.00  our ownership interest ncy by the entireties, or
Street addres		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? C Debtor 1 only Debtor 2 only Debtor 2 only	the amount Creditors W  Current val entire prope \$20  Describe th (such as fer a life estate Tenancy	of any secured the Have Claim ue of the erty?  0,000.00  ne nature of your estimates the simple, tenates, if known.  by the Entities if this is communication and the communication are simpled to the communication and the communication are simpled to the communicat	claims on Schedule D: s Secured by Property.  Current value of the portion you own? \$200,000.00  our ownership interest ncy by the entireties, or
Street addres		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? C Debtor 1 only Debtor 2 only At least one of the debtors and and	the amount Creditors W  Current val entire prope \$20  Describe th (such as fer a life estate Tenancy  Tenancy  Check (see inst	of any secured the Have Claim ue of the erty? 0,000.00 ne nature of you simple, tena e), if known. by the Entitructions)	claims on Schedule D: s Secured by Property.  Current value of the portion you own? \$200,000.00  our ownership interest ncy by the entireties, or tirety
Street addres		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? C Debtor 1 only Debtor 2 only Debtor 2 only	the amount Creditors W  Current val entire prope \$20  Describe th (such as fer a life estate Tenancy  Tenancy  Check (see inst	of any secured the Have Claim ue of the erty? 0,000.00 ne nature of you simple, tena e), if known. by the Entitructions)	claims on Schedule D: s Secured by Property.  Current value of the portion you own? \$200,000.00  our ownership interest ncy by the entireties, or tirety
Street addres		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? C Debtor 1 only Debtor 2 only At least one of the debtors and and Other information you wish to add abo	the amount Creditors W  Current valentire prope \$20  Describe th (such as fer a life estate Tenancy  Other Check (see instruction of the county)	of any secured the Have Claim use of the erty?  0,000.00  Be nature of your end in the end the	claims on Schedule D: s Secured by Property.  Current value of the portion you own? \$200,000.00  our ownership interest ncy by the entireties, or tirety
Street addres		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? C Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Other information you wish to add abo property identification number:	the amount Creditors W  Current valentire prope \$20  Describe th (such as fer a life estate Tenancy  Other Check (see instruction of the county)	of any secured the Have Claim use of the erty?  0,000.00  Be nature of your end in the end the	claims on Schedule D: s Secured by Property.  Current value of the portion you own? \$200,000.00  our ownership interest ncy by the entireties, or tirety

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1 Debtor 2 Manzo, Robert P 8	& Manzo, Grace C	Case number (if known)			
3. Cars, vans, trucks, tractors, sp	ort utility vehicles, motorcycles				
□ No					
Yes					
3.1 Make:	Who has an interest in the property? Check one	the amount of any s	red claims or exemptions. Put secured claims on Schedule D:		
Model:	Debtor 1 only	Creditors Who Have	e Claims Secured by Property.		
Year:  Approximate mileage:	Debtor 2 only	Current value of the	ne Current value of the portion you own?		
Other information:	Debtor 1 and Debtor 2 only  At least one of the debtors and another	entire property?	portion you own?		
2009 Hyundai Sonata	At least one of the debtors and another				
2000 Hydriadi Goriada	Check if this is community property (see instructions)	\$4,000.	94,000.00		
	rtion you own for all of your entries from Part 2, including a		\$4,000.00		
Part 3: Describe Your Personal and	Household Items				
Do you own or have any legal or	equitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.		
<ol> <li>Household goods and furnishin Examples: Major appliances, furn ☐ No</li> </ol>					
Yes. Describe					
furni	iture		\$1,000.00		
	s; audio, video, stereo, and digital equipment; computers, printer s, cameras, media players, games	s, scanners; music collect	ions; electronic devices		
■ No □ Yes. Describe					
collections, memoral  No	s; paintings, prints, or other artwork; books, pictures, or other art bilia, collectibles	t objects; stamp, coin, or b	aseball card collections; other		
☐ Yes. Describe					
instruments	pies exercise, and other hobby equipment; bicycles, pool tables, golf	clubs, skis; canoes and k	ayaks; carpentry tools; musica		
■ No □ Yes. Describe					
10. <b>Firearms</b> Examples: Pistols, rifles, shotgi ■ No	uns, ammunition, and related equipment				
☐ Yes Describe					

Official Form 106A/B Schedule A/B: Property page 2

	ebtor 1 ebtor 2	Manzo, Rob	ert P & Manzo,	Grace C	Case number (if known)	
			thes, furs, leather o	coats, designer wear, shoes, accessories		
	□ No	Dagariba				
	■ Yes. I	Describe	clothes			\$200.00
40	laalm.					
12.	_ `		elry, costume jewe	elry, engagement rings, wedding rings, heirlo	oom jewelry, watches, gems, gold,	silver
	■ No □ Yes. I	Describe				
13.		<b>m animals</b> <i>les:</i> Dogs, cats, b	oirds, horses			
	☐ Yes. [	Describe				
14.	Any oth  ■ No	er personal and	d household items	s you did not already list, including any	health aids you did not list	
	☐ Yes. (	Give specific info	ormation			
15				ies from Part 3, including any entries for	r pages you have attached for	\$1,200.00
Pa	rt 4: Des	scribe Your Financ	cial Assets			
Do	you own	n or have any le	egal or equitable i	interest in any of the following?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
16.	□ No		•	in your home, in a safe deposit box, and on l	hand when you file your petition	
	<b>—</b> 165				cash	\$50.00
				ancial accounts; certificates of deposit; share le accounts with the same institution, list ea		ses, and other similar
	Yes			Institution name:		
			17.1.	checking Chase		\$0.00
			17.2.	checking Chase		\$300.00
			17.2.	- Criccking Chase		<del></del>
			17.3.	Checking TD		\$100.00
			17.4.	Savings TD Bank		\$250.00
18.	Bonds.	mutual funds, o	or publicly traded	stocks		
				nts with brokerage firms, money market acco	punts	
	☐ Yes		Institutio	n or issuer name:		

Official Form 106A/B Schedule A/B: Property

	ebtor 1 ebtor 2	Manzo, Robert P & Manzo, Grace C		Case number (if known)	
19.	joint v	ublicly traded stock and interests in incorpora enture	ated and unincorporated b	ousinesses, including an interest in an	LLC, partnership, and
	■ No □ Yes.	Give specific information about them	<b></b>	% of ownership:	
20.	Negoti	nment and corporate bonds and other negotia iable instruments include personal checks, cashie egotiable instruments are those you cannot transf	ers' checks, promissory note	nstruments s, and money orders.	
		Give specific information about them Issuer name:			
21.	Examµ □ No -	nent or pension accounts oles: Interests in IRA, ERISA, Keogh, 401(k), 403	3(b), thrift savings accounts	, or other pension or profit-sharing plans	
	Yes.	List each account separately.  Type of account:	Institution name:		\$27,000.00
			IRA		\$27,600.00
			IRA		\$19,300.00
			401K		\$2,000.00
23.		ies (A contract for a periodic payment of money to	Institution name or in o you, either for life or for a r		
	☐ Yes	Issuer name and description.			
24.		s in an education IRA, in an account in a qual C. §§ 530(b)(1), 529A(b), and 529(b)(1).	lified ABLE program, or u	nder a qualified state tuition program.	
	☐ Yes	Institution name and description.	Separately file the records o	f any interests.11 U.S.C. § 521(c):	
	■ No	equitable or future interests in property (oth Give specific information about them	er than anything listed in	line 1), and rights or powers exercisab	le for your benefit
	Examp ■ No	s, copyrights, trademarks, trade secrets, and bles: Internet domain names, websites, proceeds  Give specific information about them			
	Examµ ■ No	es, franchises, and other general intangibles oles: Building permits, exclusive licenses, coopera Give specific information about them	ative association holdings, lid	ູuor licenses, professional licenses	
		property owed to you?			Current value of the
					portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 4

	ebtor 1 ebtor 2	Manzo, Robert P & Manzo, Grace C	Case number (if known)	
28.	_	unds owed to you		
	■ No □ Yes.	Give specific information about them, including whether you already file	d the returns and the tax years	
	Examp  ■ No	support  bles: Past due or lump sum alimony, spousal support, child support, m	naintenance, divorce settlement, property set	tlement
	Li res.	Give specific information		
		amounts someone owes you  bles: Unpaid wages, disability insurance payments, disability benefits, si  unpaid loans you made to someone else	ick pay, vacation pay, workers' compensation	, Social Security benefits;
	_	Give specific information		
31.		ts in insurance policies oles: Health, disability, or life insurance; health savings account (HSA);	credit, homeowner's, or renter's insurance	
	☐ Yes.	Name the insurance company of each policy and list its value.  Company name:	Beneficiary:	Surrender or refund value:
		terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance	e policy, or are currently entitled to receive pro	perty because someone has
	_	Give specific information		
	Examp  ■ No	against third parties, whether or not you have filed a lawsuit or notes: Accidents, employment disputes, insurance claims, or rights to s		
		Describe each claim		
	■ No	contingent and unliquidated claims of every nature, including cou	intercialms of the deptor and rights to set	orr claims
	☐ Yes.	Describe each claim		
35.	Any fin  ■ No	ancial assets you did not already list		
		Give specific information		
36		the dollar value of all of your entries from Part 4, including any en		\$76,600.00
Pa	rt 5: De:	scribe Any Business-Related Property You Own or Have an Interest In. Li	st any real estate in Part 1.	
37.	Do you o	own or have any legal or equitable interest in any business-related proper	ty?	
	_	o to Part 6.		
L	☑ Yes. G	Go to line 38.		
Pa		scribe Any Farm- and Commercial Fishing-Related Property You Own or lou own or have an interest in farmland, list it in Part 1.	Have an Interest In.	
46.		own or have any legal or equitable interest in any farm- or comn	nercial fishing-related property?	
	_	Go to Part 7.		
	⊔ Yes.	Go to line 47.		
D.	t. 7.	Describe All Drawarty Voy Own or Have an Interest in That You Bid Nat	Lint Above	

Describe All Property You Own or Have an Interest in That You Did Not List Above

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Official Form 106A/B

Debt Debt	Manaa Bahari B & Manaa Crass C		Case number (if known)	
	o you have other property of any kind you did not already list?  Examples: Season tickets, country club membership  No			
_	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write that	number here		\$0.00
Part 8	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$200,000.00
56.	Part 2: Total vehicles, line 5	\$4,000.00		
57.	Part 3: Total personal and household items, line 15	\$1,200.00		
58.	Part 4: Total financial assets, line 36	\$76,600.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$81,800.00	Copy personal property tot	sal <b>\$81,800.00</b>
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$281,800.00

Official Form 106A/B Schedule A/B: Property page 6

Fill	l in this inform	ation to identify your c	ase:				
_	ebtor 1	Robert P Manzo					
00		First Name	Middle Name	L	ast Name	}	
	btor 2 ouse if, filing)	First Name	Middle Name	- 1	ast Name		
Un	lited States Ban	kruptcy Court for the:	EASTERN DISTRICT OF NE	EVV Y	JKK		
	ise number					_	Chack if this is an
(11 K	anown)					"	Check if this is an amended filing
_	· · · · -	4000				_	Ū
	fficial For						
S	chedule	e C: The Pro	perty You Cla	im	as Exempt		4/16
oropout know <b>For</b>	perty you listed of and attach to the wn).	on Schedule A/B: Propertis page as many copies of property you claim as e	rty (Official Form 106A/B) as you of Part 2: Additional Page as ne exempt, you must specify the	ur sou cessa amo	, both are equally responsible for sur irce, list the property that you claim a ry. On the top of any additional page: unt of the exemption you claim. O	s exempt. If it is, write your in	more space is needed, fill name and case number (if oing so is to state a
app fund to a	licable statuto ds-may be ur	ry limit. Some exempti nlimited in dollar amou lar amount and the val	ons—such as those for healt nt. However, if you claim an e	h aid exem <sub>l</sub>	market value of the property bein s, rights to receive certain benefit otion of 100% of fair market value o exceed that amount, your exemp	s, and tax-e under a law	xempt retirement that limits the exemption
Pa	rt 1: Identify	the Property You Cla	m as Exempt				
1.	Which set of	exemptions are you cla	aiming? Check one only, even	if you	r spouse is filing with you.		
	You are clai	iming state and federal n	onbankruptcy exemptions. 11 l	J.S.C	. § 522(b)(3)		
	_	ming federal exemptions			3(-)(-)		
2					III in the information below		
۷.		For any property you list on Schedule A/B that you claim as exempt, fill in the information below.					
		on of the property and line hat lists this property	on Current value of the portion you own	Am	ount of the exemption you claim	Specific la	ws that allow exemption
			Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
De	ebtor 1 Exem	ptions	Concació / VD				
	2009 Hyund	lai Sonata	\$4,000.00		\$4,000.00		ot & Cred. Law §
	Line from Scho	edule A/B: <b>3.1</b>			100% of fair market value, up to	282(1)	
				_	any applicable statutory limit		
	furniture		<b>*</b> 4 000 00	_	<b>#4 000 00</b>	N Y Civ	. Prac. Law and Rules
	Line from School	edule A/B: <b>6.1</b>	\$1,000.00	_	\$1,000.00	§ 5205(a	
					100% of fair market value, up to any applicable statutory limit		
	clothes		\$200.00		\$200.00	N.Y. Civ	. Prac. Law and Rules
	Line from School	edule A/B: <b>11.1</b>	Ψ200:00	_	<u>.</u>	§ 5205(a	)(5)
					100% of fair market value, up to any applicable statutory limit		
3.	(Subject to adj ■ No	ustment on 4/01/19 and you acquire the property	, ,	s filed	on or after the date of adjustment.) 5 days before you filed this case?		

Official Form 106C

						_
Fill	in this inform	nation to identify your	case:			
Del	btor 1					7
		First Name	Middle Name	La	st Name	}
	btor 2 buse if, filing)	Grace C Manzo First Name	Middle Name	La	st Name	
` .	. 0,	nkruptcy Court for the:	EASTERN DISTRICT OF			
	se number					☐ Check if this is an amended filing
Of	ficial Fo	rm 106C				
			operty You Cl	laim	as Exempt	4/16
orop out a	erty you listed	on Schedule A/B: Prope	erty (Official Form 106A/B) as	your sour	ce, list the property that you claim a	oplying correct information. Using the is exempt. If more space is needed, fill s, write your name and case number (if
spe app func to a	cific dollar am licable statuto ds—may be u	nount as exempt. Alterr ory limit. Some exempt nlimited in dollar amou llar amount and the val	natively, you may claim the ions—such as those for he ınt. However, if you claim a	e full fair i ealth aids an exemp	, rights to receive certain benefit	ng exempted up to the amount of any is, and tax-exempt retirement under a law that limits the exemption
Pai	rt 1: Identif	y the Property You Cla	nim as Exempt			
1.	Which set of	exemptions are you cl	aiming? Check one only, ev	∕en if your	spouse is filing with you.	
	You are cla	iming state and federal n	nonbankruptcy exemptions.	11 U.S.C.	8 522(b)(3)	
	_	-	s. 11 U.S.C. § 522(b)(2)	0.0.0.	3 0==(0)(0)	
_					Do the before all or heles.	
2.			ule A/B that you claim as e	• •		
		on of the property and line that lists this property	e on Current value of the portion you own	e Amo	unt of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Chec	k only one box for each exemption.	
<u>De</u>	Brief description Sch	on:			100% of fair market value, up to any applicable statutory limit	
3.	(Subject to ad	justment on 4/01/19 and you acquire the property		ases filed	on or after the date of adjustment.) days before you filed this case?	
	_ ``	· <del>-</del>				

Official Form 106C

Fill in this informat	tion to identify you	case:			
Debtor 1	Robert P Manzo	)			
	First Name	Middle Name Last Name			
Debtor 2	Grace C Manzo				
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Bank	ruptcy Court for the:	EASTERN DISTRICT OF NEW YORK			
Case number					
(if known)				☐ Check	if this is an
				amend	led filing
Official Form	106D				
Schedule D	: Creditors	Who Have Claims Secured	d by Propert	У	12/15
		two married people are filing together, both are equ , number the entries, and attach it to this form. On the			
1. Do any creditors ha	ive claims secured by	your property?			
	-	s form to the court with your other schedules. You	have nothing else to re	port on this form.	
	of the information be	•	mare neumig elec te re	port or une rounn	
		SIOW.			
*	Secured Claims		Column A	Column B	Column C
for each claim. If more	e than one creditor has	nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As all order according to the creditor 's name.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
2.1 Wells Fargo	Hm Mortgag	Describe the property that secures the claim:	value of collateral. <b>\$240,232.00</b>	s200,000.00	If any \$40,232.00
Creditor's Name	orim mortgag	residence: 11 Shirra Ave., Staten Island, NY 10314	Ψ2-10,202.00	Ψ200,000.00	Ψ10,202.00
8480 Stage		As of the date you file, the claim is: Check all that apply.			
Frederick, M		Contingent			
Number, Street, C	ity, State & Zip Code	Unliquidated			
Who owes the debt	? Check one.	Disputed  Nature of lien. Check all that apply.			
■ Debtor 1 only		☐ An agreement you made (such as mortgage or sec	cured		
Debtor 2 only		car loan)			
Debtor 1 and Debtor	or 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the	debtors and another	☐ Judgment lien from a lawsuit			
Check if this clair community debt		Other (including a right to offset)			
Date debt was incurr	ed	Last 4 digits of account number 7613			
Add the dollar value	of your entries in Col	umn A on this page. Write that number here:	\$240,232	2.00	
If this is the last page Write that number he		e dollar value totals from all pages.	\$240,232		
Part 2: List Other	rs to Be Notified for	a Debt That You Already Listed			
Hea this nage only if	you have others to be	notified about your hankruptcy for a debt that you	already listed in Part 1	For example, if a collecti	on agency is

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK  Case number (if thrown)    Check if this is an armended filling    Check if this is an armended fill in School in this part. Submit this for a community debt.   Check on a check on the check armended fill in School in the Check armended filling   Check if this claim is the other check on a debt.   Check on a check on the check armended filling in School in the Check armended filling in School in the Check armende				
Debtor 2   Grace C Manzo	Fill in this infor	mation to identify your o	case:	
Debtor 2   Grace C Manzo	Debtor 1	Robert P Manzo		
United States Bankruptcy Court for the:  EASTERN DISTRICT OF NEW YORK  Case number (if known)  Chricial Form 106E/F  Schedule E/F: Creditors Who Have Unsecured Claims  12/15  12/15  12/15  12/15  12/15  12/15  12/15  12/15  12/15  12/16  12			Middle Name Last Name	
Case number   Ca	Debtor 2			
Case number   Check if this is an amended filing   Check if this is an amended filing    Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims   12/15    Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to richedule of: Executiory Contracts and Unserprice Leases (Official Form 106C). Do not include any creditors with NonPRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to richedule of: Executiory Contracts and Unserprice Leases (Official Form 106C). Do not include any creditors with partially secured claims that are listed in Schedule of: Executiory Contracts and Unserpriced Leases (Official Form 106C). Do not include any creditors with partially secured claims that are listed in Schedule to Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and be an under the continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and be an under the page of the part of the part of the page of the part of the page	(Spouse if, filing)	First Name	Middle Name Last Name	
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims  12/15  Let a complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to revenue or contracts or unappriorite leases that could result in a claim. Also list severatory contracts on Schedule A/B: Property (Official Form 106/B) and on related to 6: Executory Contracts and Unexpired Leases (Official Form 106/B) to not include any creditors with partially secured claims that are listed in Schedule O: Executory Contracts and Unexpired Leases (Official Form 106/B) to not include any creditors with partially secured claims that are listed in Schedule O: Executory Contracts and Unexpired Leases (Official Form 106/B) to not include any creditors with partially secured claims that are listed in Schedule O: Cerditors with a varied law or the list. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and sea number (if known).  2015 I List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?    No. for I are reditor shave nonpriority unsecured claims against you?    Yes.  2017 2: List All of Your NONPRIORITY Unsecured Claims  2018 No. Got Dart 2.    Yes.  4. List All of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims lil out the Continuation Page of Part 2.  21	United States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF NEW YORK	
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims  12/15  Let a complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to revenue or contracts or unappriorite leases that could result in a claim. Also list severatory contracts on Schedule A/B: Property (Official Form 106/B) and on related to 6: Executory Contracts and Unexpired Leases (Official Form 106/B) to not include any creditors with partially secured claims that are listed in Schedule O: Executory Contracts and Unexpired Leases (Official Form 106/B) to not include any creditors with partially secured claims that are listed in Schedule O: Executory Contracts and Unexpired Leases (Official Form 106/B) to not include any creditors with partially secured claims that are listed in Schedule O: Cerditors with a varied law or the list. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and sea number (if known).  2015 I List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?    No. for I are reditor shave nonpriority unsecured claims against you?    Yes.  2017 2: List All of Your NONPRIORITY Unsecured Claims  2018 No. Got Dart 2.    Yes.  4. List All of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims lil out the Continuation Page of Part 2.  21	Casa numbar			
Difficial Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims  12/15  Les acomplete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other part y to record the count and the count of the	(if known)			☐ Check if this is an
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other part y to revective y contracts or unscripted leases that could result in a claim. Also list executory contracts on Schedule Alb: Property (Official Form 106Ab) and on schedule 6: Executory Contracts and Unexpired Leases (Official Form 106Ab). Do not include any creditors with partially secured claims that are listed in Schedule 6: Executory Contracts and Unexpired Leases (Official Form 106Ab). Do not include any creditors with partially secured claims that are listed in Schedule 6: Executory Contracts and Unexpired Leases (Official Form 106Ab) and on the count with partially secured claims that are listed in Schedule 6: Executory Contracts and Unexpired Leases (Official Form 106Ab) and on the count with your preditors with partially secured claims that are listed in Schedule as enumber (if Nown).  Part 3: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?    No. You have nothing to report in this part. Submit this form to the court with your other schedules.   Yes.				amended filing
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other part y to revective y contracts or unscripted leases that could result in a claim. Also list executory contracts on Schedule Alb: Property (Official Form 106Ab) and on schedule 6: Executory Contracts and Unexpired Leases (Official Form 106Ab). Do not include any creditors with partially secured claims that are listed in Schedule 6: Executory Contracts and Unexpired Leases (Official Form 106Ab). Do not include any creditors with partially secured claims that are listed in Schedule 6: Executory Contracts and Unexpired Leases (Official Form 106Ab) and on the count with partially secured claims that are listed in Schedule 6: Executory Contracts and Unexpired Leases (Official Form 106Ab) and on the count with your preditors with partially secured claims that are listed in Schedule as enumber (if Nown).  Part 3: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?    No. You have nothing to report in this part. Submit this form to the court with your other schedules.   Yes.	O#:-:-!	400E/E		
List all of Your NONPRIORITY Unsecured Claims against you?    Yes.				4044=
my executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AB: Property (Official Form 196A/B) and on circledue of schedule of Schedule AB: Property (Official Form 196A) on on circled any creditors with partially secured claims that are listed in Schedule C: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach he Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and ase number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims    No. Go to Part 2.				
1. Do any creditors have priority unsecured claims against you?    No. Go to Part 2.   Yes.   No. Go to Part 2.   Yes.   List All of Your NONPRIORITY Unsecured Claims   No. Go to Part 2.   List All of Your NonPRIORITY Unsecured Claims against you?   No. You have nothing to report in this part. Submit this form to the court with your other schedules.   Yes.   List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.    No	Schedule G: Exect D: Creditors Who Ithe Continuation F case number (if kn	utory Contracts and Unexpi Have Claims Secured by Pr Page to this page. If you have lown).	ired Leases (Official Form 106G). Do not include any creditors with partially so operty. If more space is needed, copy the Part you need, fill it out, number the ve no information to report in a Part, do not file that Part. On the top of any ad	ecured claims that are listed in Schedule entries in the boxes on the left. Attach
No. Go to Part 2:  Yes.    Yes.   Part 2: List All of Your NONPRIORITY Unsecured Claims   No. You have nonpriority unsecured claims against you?   No. You have nothing to report in this part. Submit this form to the court with your other schedules.   Yes.   List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.	Part 1: List A	All of Your PRIORITY Un	secured Claims	
Part 2: List All of Your NONPRIORITY Unsecured Claims  Do any creditors have nonpriority unsecured claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.  Yes.  List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.  Bk Of Amer Nonpriority Creditor's Name  When was the debt incurred?  Po Box 982238  El Paso, TX 79998  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims No Debts to pension or profit-sharing plans, and other similar debts	1. Do any credit	ors have priority unsecure	d claims against you?	
3. Do any creditors have nonpriority unsecured claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.  Yes.  4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.  BR Of Amer Nonpriority Creditor's Name  When was the debt incurred?  PO BOX 982238  EI Paso, TX 79998  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Contingent Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 file debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts	No. Go to	Part 2.		
3. Do any creditors have nonpriority unsecured claims against you?    No. You have nothing to report in this part. Submit this form to the court with your other schedules.   Yes.	☐ Yes.			
No. You have nothing to report in this part. Submit this form to the court with your other schedules.  Yes.  4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.  Total claim  Bk Of Amer Nonpriority Creditor's Name  When was the debt incurred?  Po Box 982238 EI Paso, TX 79998 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only Disputed Type of NoNPRIORITY unsecured claim: Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts	Part 2: List A	All of Your NONPRIORIT	Y Unsecured Claims	
unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.  4.1 Bk Of Amer	Yes.		·	r has more than one nonpriority
As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Contingent  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No  Last 4 digits of account number 6699  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Contingent  Unliquidated  Disputed  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	unsecured cla than one credi	im, list the creditor separately	for each claim. For each claim listed, identify what type of claim it is. Do not list cla	ims already included in Part 1. If more
Nonpriority Creditor's Name  Po Box 982238 EI Paso, TX 79998  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated				Total claim
When was the debt incurred?  Po Box 982238 EI Paso, TX 79998  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply	4.1 <b>Bk Of</b> A	Amer	Last 4 digits of account number 6699	\$2,936.00
Po Box 982238 EI Paso, TX 79998  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Contingent  Debtor 1 and Debtor 2 only Disputed  Type of NONPRIORITY unsecured claim: Student loans Debt subject to offset? Debts to pension or profit-sharing plans, and other similar debts	Nonpriori	ty Creditor's Name		
Number Street City State ZIp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 3 separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	Po Box	c 982238	when was the debt incurred?	
Who incurred the debt? Check one.  Debtor 1 only		,		
□ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts			As of the date you file, the claim is: Check all that apply	
□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts	_		_	
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts		•		
☐ At least one of the debtors and another ☐ Check if this claim is for a community debt ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ No ☐ Debts to pension or profit-sharing plans, and other similar debts		•	`	
☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts		•		
debt    Obligations arising out of a separation agreement or divorce that you did not report as priority claims   No				
Is the claim subject to offset?  report as priority claims  □ No □ Debts to pension or profit-sharing plans, and other similar debts □		k if this claim is for a comr	numty	ot you did not
		im subject to offset?		at you did flot
☐ Yes ☐ Other. Specify	■ No		$\square$ Debts to pension or profit-sharing plans, and other similar debt	S
	☐ Yes		Other. Specify	

Debto Debto		;	Case number (f know)	
4.2	Bk Of Amer Nonpriority Creditor's Name	Last 4 digits of account number	3633	\$1,980.00
	Horpholity Croater & Hame	When was the debt incurred?		
	Po Box 982235			
	El Paso, TX 79998  Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam'r	3. Officers all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐Yes	Other. Specify		
4.3	Ccs/first National Ban	Last 4 digits of account number	2420	\$295.00
	Nonpriority Creditor's Name	When was the debt incurred?		
	500 East 60th St N	When was the dest mounted.		
	Sioux Falls, SD 57104			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharin		
	■ No		g plans, and other similar debts	
	Yes	Other. Specify		
4.4	Chase Card	Last 4 digits of account number	2940	\$1,543.00
	Nonpriority Creditor's Name	When was the debt incurred?		
	Po Box 15298			
	Wilmington, DE 19850	A f the data was file the alaim i	Charles II that are the	
	Number Street City State ZIp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	П о-т-t		
	☐ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	Debtor 1 and Debtor 2 only	·		
	☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	☐ At least one or the debtors and another ☐ Check if this claim is for a community	☐ Student loans		
	debt	_	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		

Debto Debto	or 1 or 2 Manzo, Robert P & Manzo, Grace	Case number (f know)				
4.5	Comenity Bank/express	Last 4 digits of account number 1493	\$1,072.00			
	Nonpriority Creditor's Name	When was the debt incurred?				
	4590 E Broad St					
	Columbus, OH 43213					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify				
4.6	Credit One Bank Na	Last 4 digits of account number 2795	\$964.00			
	Nonpriority Creditor's Name	When was the debt incurred?				
	Po Box 98872	When was the debt incurred:				
	Las Vegas, NV 89193					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify				
4.7	Discover Fin Svcs Llc	Last 4 digits of account number 9544	\$1,555.00			
	Nonpriority Creditor's Name	When was the debt incurred?				
	Po Box 15316					
	Wilmington, DE 19850					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Other Specify				

Debto Debto	or 1 or 2 Manzo, Robert P & Manzo, Grace	Case number (f know)	
4.8	Discover Fin Svcs Llc	Last 4 digits of account number 7466	\$9,463.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	Po Box 15316		
	Wilmington, DE 19850	_	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only		
		☐ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not	
	No	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
		_	
	Yes	Other. Specify	
4.9	Dsnb Macys	Last 4 digits of account number 1510	\$915.00
	Nonpriority Creditor's Name		·
	Po Box 8218	When was the debt incurred?	
	Mason, OH 45040		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.10	Gap/	Last 4 digits of account number 7792	\$172.00
	Nonpriority Creditor's Name		<b>VIII</b>
		When was the debt incurred?	
	P O Box 960017 Synchrony Bank		
	Orlando, FL 32896  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other Specify	

Nonpriority Creditor's Name  Po Box 6282 Sioux Falls, SD 57117 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor is the claim subject to offset? No Debtor 3 onforty Creditor's Name Nonpriority Creditor's Name  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Debtor 2 only  Unliquidated	Debto Debto	Manzo, Robert P & Manzo, Grace	Case number (f know)	
Nonpriority Creditor's Name  13200 Smith Rd Cleveland, OH 44130 Number Street CRy State ZIp Code Who incurred the debt? Check one.  Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Sears/Cbna Nonpriority Creditor's Name  Po Box 6282 Sloux Falls, SD 57117 Number Street CRy State ZIp Code Who incurred the debtor and another Check if this claim is for a community debt Is the claim subject to offset?  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Who incurred the debt? Check one.  Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Is the claim is to a community debt Is the claim is to a community debt Is the claim is ubject to offset? Check if this claim is for a community debt Is the claim is ubject to offset? Check if this claim is for a community debt Is the claim is ubject to offset? Check if this claim is for a community Check if this claim is for a community debt Is the claim is ubject to offset? Check if this claim is for a community Check if this claim is the claim is the claim is: Check all that apply Check if this claim is for a community Check if this claim is for a community Check if this claim is for a community Check if this claim is the claim is: Check all that apply Check if this claim is the claim is: Check all that apply Check if this claim is the claim is: Check all that apply Check if this claim is the claim is: Check all that apply Check if the claim is: Check all that apply Check if the claim is: Check all that apply Check if the claim is: Check all that apply Check if the claim is: Check all that apply Check if the claim is: Check all that apply Check if the claim is: Check all that apply Check if the claim is: Check all that apply Check if the claim is:	4.11	Sears/cbna	Last 4 digits of account number 9815	\$2,420.00
133200 Smith Rd   Cleveland, OH 44130   Number Street City State Zip Code   Who incurred the debt? Check one.     Contingent   Debtor 1 only   Debtor 2 only			When we she dold incorred?	• •
Cleveland, OH 44130		133200 Smith Rd	when was the debt incurred?	
Who incurred the debt? Check one.    Debtor 1 only		Cleveland, OH 44130		
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 4 only Debtor 2 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 8 only Debtor 8 only Debtor 8 only Debtor 9 on		Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Debtor 2 only		<u></u>		
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Yes □ Other. Specify    At least one of the debtor 2 only □ Debtor 1 only □ Debtor 1 only □ Check if this claim is for a community debt   Student loans		■ Debtor 1 only	☐ Contingent	
At least one of the debtors and another   Check if this claim is for a community debt is the claim subject to offset?   Contingent   Check if this claim is for a community debt   Check offset?   Contingent   Check if this claim is for a community debt   Check offset?   Check if this claim is for a community debt   Check if this claim is check all that apply   Check if this claim is check all that apply   Check if this claim is check all that apply   Check if this claim is check		Debtor 2 only	☐ Unliquidated	
Check if this claim is for a community debt   Steed of the claim subject to offset?   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Debts to pension or profit-sharing plans, and other similar debts   Po Box 6282   Sioux Falls, SD 57117   Number Street City State Zip Code   Who incurred the debt? Check one.   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 1 only   Debtor 1 sist of the debtors and another   Debtor 1 sist he claim subject to offset?   Debts to pension or profit-sharing plans, and other similar debts   State Incurred the debt (Check one.   Debts to pension or profit-sharing plans, and other similar debts   Debts to pension or profit-sharing plans, and other similar debts   State Incurred the debt (Check one.   Debts to pension or profit-sharing plans, and other similar debts   Debts to pension or profit-sharing plans, and other similar debts   State Incurred?   State Incurred?   State Incurred the debt? Check one.   Debts to pension or profit-sharing plans, and other similar debts   State Incurred?   State Incur		☐ Debtor 1 and Debtor 2 only	☐ Disputed	
Contingent   Con		At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Is the claim subject to offset?  No Debts to pension or profit-sharing plans, and other similar debts Cher. Specify  Last 4 digits of account number Po Box 6282 Sioux Falls, SD 57117 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Is the claim subject to offset? No Debtor 1 only Debtor 2 only Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? No Debtor 2 only Debtor 3 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 only Check if this claim is for a community debt Debtor 8 only Debtor 9 only D		☐ Check if this claim is for a community	☐ Student loans	
Yes   Other. Specify				
4.12   Sears/cbna		■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Nonpriority Creditor's Name  Po Box 6282 Sioux Falls, SD 57117  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor is the claim subject to offset? No Debtor 3 offset? No Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 3 esparation agreement or divorce that you did not report as priority claims Debtor 3 offset? Other. Specify  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  4.13  Sears/cbna Nonpriority Creditor's Name When was the debt incurred?  4.32  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only  When was the debt incurred?		Yes	Other. Specify	
Po Box 6282 Sioux Falls, SD 57117 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 8 of Check if this claim is for a community debt Is the claim subject to offset?  No Debtor 8 of Check if this claim is for a community debt Is the claim subject to offset? Sears/cbna Nonpriority Creditor's Name  When was the debt incurred?  When was the debt incurred?  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Who incurred the debt? Check one.  Debtor 2 only Debtor 2 only Unliquidated  Unliquidated  Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is to a community debt of the claim is sharing plans, and other similar debts  Other. Specify  When was the debt incurred?  4.13 Sears/cbna Nonpriority Creditor's Name When was the debt incurred?  As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Unliquidated	4.12		Last 4 digits of account number 5497	\$2,261.00
Po Box 6282 Sioux Falls, SD 57117 Number Street City State ZIp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 and Debtor 3 only Debtor 4 teast one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 only Debtor 2 only Sears/cbna Nonpriority Creditor's Name When was the debt incurred?  4.13 Sears/cbna Nonpriority Creditor's Name When was the debt incurred?  As of the date you file, the claim is: Check all that apply When was the debt incurred?  As of the date you file, the claim is: Check all that apply When was the debt incurred?		Nonpriority Creditor's Name	When was the debt incurred?	
Sioux Falls, SD 57117 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  Who incurred the debt? Check one.  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Contingent Debtor 2 only  Debtor 2 only  Debtor 2 only  As of the date you file, the claim is: Check all that apply		Po Boy 6282	when was the debt incurred?	
As of the date you file, the claim is: Check all that apply  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 and another Check if this claim is for a community debt Is the claim subject to offset? Debtor 1 and Debtor 2 only Debtor 3 a community debt Student loans Debtor 4 digits of account number Debtor 5 who incurred the debt? Check one.  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply				
Debtor 1 only			As of the date you file, the claim is: Check all that apply	
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ Other. Specify □ Other. Specify □ Other. Specify □ Manumber Street City State Zip Code Who incurred the debt? Check one. □ Debtor 2 only □ Debtor 2 only □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify □ Other. Specify □ When was the debt incurred? □ As of the date you file, the claim is: Check all that apply □ Contingent □ Debtor 2 only □ Unliquidated		Who incurred the debt? Check one.		
Debtor 1 and Debtor 2 only  At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  Last 4 digits of account number  133200 Smith Rd Cleveland, OH 44130  Number Street City State Zip Code Who incurred the debt? Check one.  Debts to postor 2 only  Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent Debtor 2 only  Debtor 1 only Debtor 2 only		■ Debtor 1 only	☐ Contingent	
Type of NONPRIORITY unsecured claim:  Check if this claim is for a community debt Is the claim subject to offset?  No Check if this claim is for a community debt Is the claim subject to offset?  No Check if this claim is for a community debt Is the claim subject to offset?  No Check if this claim is for a community debt Is the claim subject to offset?  No Check if this claim is for a community debt is the claim subject to offset?  Check if this claim is for a community debt is the claim subject to offset?  Check if this claim is for a community debt is the claim serior of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Check if this claim is the claim is check all that apply  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent Debtor 2 only  Unliquidated		Debtor 2 only	☐ Unliquidated	
Check if this claim is for a community debt Is the claim subject to offset?  No Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising plans, and other similar debts Other. Specify  Last 4 digits of account number Other. Specify  When was the debt incurred?  4.13 Sears/cbna Nonpriority Creditor's Name When was the debt incurred?  4.13 When was the debt incurred?  As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Pobligations arising out of a separation agreement or divorce that you did not report as priority claims Pobligations arising out of a separation agreement or divorce that you did not report as priority claims Pobligations arising out of a separation agreement or divorce that you did not report as priority claims Pobligations arising out of a separation agreement or divorce that you did not report as priority claims Pobligations arising out of a separation agreement or divorce that you did not report as priority claims Pobligations arising out of a separation agreement or divorce that you did not report as priority claims Pobligations arising out of a separation agreement or divorce that you did not report as priority claims Pobligations arising out of a separation agreement or divorce that you did not report as priority claims Pobligations arising out of a separation agreement or divorce that you did not report as priority claims Pobligations arising out of a separation agreement or divorce that you did not report as priority claims Pobligations arising out of a separation agreement or divorce that you did not report as priority claims Pobligations arising out of a separation agreement or divorce that you did not report as priority claims Pobligations arising out of a separation agreement or divorce that you did not report as priori		☐ Debtor 1 and Debtor 2 only	☐ Disputed	
debt Is the claim subject to offset?  No Pes    Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Debts to pension or profit-sharing plans, and other similar debts   Other. Specify		☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Is the claim subject to offset?    No		☐ Check if this claim is for a community	☐ Student loans	
■ No □ Debts to pension or profit-sharing plans, and other similar debts □ Yes □ Other. Specify  ■ Other. Specify □ Other. S				
A.13  Sears/cbna Nonpriority Creditor's Name  Heat 4 digits of account number 9618  When was the debt incurred?  Men was the debt incurred?  As of the date you file, the claim is: Check all that apply  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only  Other. Specify  Last 4 digits of account number 9618  When was the debt incurred?  As of the date you file, the claim is: Check all that apply			<u> </u>	
4.13 Sears/cbna Last 4 digits of account number 9618 \$2,129.00  Nonpriority Creditor's Name  When was the debt incurred?  133200 Smith Rd Cleveland, OH 44130  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only  Last 4 digits of account number 9618  \$2,129.00			_	
Nonpriority Creditor's Name  When was the debt incurred?  133200 Smith Rd Cleveland, OH 44130  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated		Li Tes	Other. Specify	
## When was the debt incurred?  133200 Smith Rd Cleveland, OH 44130  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated	4.13		Last 4 digits of account number 9618	\$2,129.00
Cleveland, OH 44130  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Unliquidated  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Unliquidated		Nonpholity Creditor's Name	When was the debt incurred?	
Number Street City State Zlp Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  As of the date you file, the claim is: Check all that apply  Contingent  Unliquidated		133200 Smith Rd		
Who incurred the debt? Check one.  ■ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated				
■ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 2 only □ Unliquidated			As of the date you file, the claim is: Check all that apply	
Debtor 2 only Unliquidated		_	По и	
		Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another  Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community  debt  ☐ Obligations arising out of a separation agreement or divorce that you did not		•	_ *****	
debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No □ Debts to pension or profit-sharing plans, and other similar debts				
Yes Other Specify			_	

Manzo, Robert P & Manzo, Grace	Case number (f know)	
Syncb/old Navy	Last 4 digits of account number 9147	\$506.00
Nonpriority Creditor's Name	When was the debt incurred?	
Po Box 965005		
Orlando, FL 32896	_	
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Syncb/toysrusdc	Last 4 digits of account number 3127	\$6,770.00
Nonpriority Creditor's Name	<del></del>	• •
Po Box 965005	When was the debt incurred?	
Po Box 963003 Orlando, FL 32896		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Syncb/walmart	Last 4 digits of account number 6822	\$1,415.00
Nonpriority Creditor's Name	When was the debt incurred?	
Po Box 965024 El Paso, TX 79998	When was the dept incurred:	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other Specify	

Debto Debto		Case number (f know)	
4.17	Syncb/walmart Dc	Last 4 digits of account number 1441	\$866.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	Po Box 965024	Then was the dest incurred:	
	Orlando, FL 32896		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.18	Td Bank Usa/targetcred	Last 4 digits of account number 2915	\$307.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	Po Box 673		
	Minneapolis, MN 55440		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.19	Thatfahara	Local Additional Community of C	<b>*</b> F0F 00
4.13	Thd/cbna Nonpriority Creditor's Name	Last 4 digits of account number 7006	\$535.00
	•	When was the debt incurred?	
	Po Box 6497		
	Sioux Falls, SD 57117  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	no or and date you me, and order to choose an area apply	
	■ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Debtor 2	Manzo, Robert P & Manzo, Grace C	Case number (f know)	

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				 _
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 38,104.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 38,104.00

Fill in this information to identify your case:							
Debtor 1	Robert P Manzo						
	First Name	Middle Name	Last Name				
Debtor 2	Grace C Manzo						
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK							
Case number _						Check if this is an amended filing	

### Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person o	r company with	whom you have the	e contract or lease	State what the contract or lease is for
2.1		Name, Number	r, Street, City, State and ZIF	<sup>2</sup> Code	
۷. ۱	Name				<del>_</del>
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.2	Name				
	Number	Street			<del></del>
2.3	City		State	ZIP Code	<del></del>
2.3	Name				<u> </u>
	Number	Street			
	City		State	ZIP Code	<del></del>
2.4	Name				<u> </u>
	Number	Street			<del></del>
	City		State	ZIP Code	_
2.5	Name				
					<u> </u>
	Number	Street			
	City		State	ZIP Code	

Official Form 106G

Fill in this inf	formation to identify your	case:			
Debtor 1	Robert P Manzo				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Grace C Manzo First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	EASTERN DISTRICT C	OF NEW YORK		
Case number	·				
(if known)					Check if this is an
					amended filing
Official F	Form 106H				
	le H: Your Cod	ebtors			12/15
<del>5011044</del>	10 111 1041 004	<del>55.5.5</del>			12/10
case number	he entries in the boxes on (if known). Answer every c u have any codebtors? (If )	uestion.		On the top of any Additional F a codebtor.	ages, write your name and
_					
■ No □ Yes					
California  No. Go	the last 8 years, have you , Idaho, Louisiana, Nevada, o to line 3. id your spouse, former spous	New Mexico, Puerto Rico	, Texas, Washington, an	? (Community property states and Wisconsin.)	nd territories include Arizona,
line 2 aga	ain as a codebtor only if th chedule E/F (Official Form	at person is a guarantor	or cosigner. Make sure	f your spouse is filing with you you have listed the creditor or e Schedule D, Schedule E/F, or	n Schedule D (Official Forn
	dumn 1: Your codebtor ne, Number, Street, City, State and Z	IP Code		Column 2: The creditor to the Check all schedules that ap	•
Nar Nur City	nber Street	State	ZIP Code	☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line	
3.2 Nar	ne			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line	
Nur City	mber Street	State	ZIP Code	_	
- 3					

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Fill	in this information to id	lentify your cas	se:							
Debtor 1 Robert P Manzo						_				
	otor 2 use, if filing)	Frace C Man			_					
Unit	ted States Bankruptcy	Court for the:	EASTERN DISTRICT	OF NEW YORK		_				
Case number (If known)				-			Check if this is  An amende  A supplement	ed filing		chapter 13
Of	ficial Form 1	061							ig date.	
	chedule I: Yo		mo				MM / DD/ Y	/YYY		12/1
supp spou	olying correct informations. If you are separa to a separate sheet to	ation. If you a ted and your this form. Or	ole. If two married peop re married and not filin spouse is not filing wit n the top of any additio	g jointly, and your h you, do not inclu	spouse is ide inform	living ation al	with you, included bout your spou	de informati se. If more s	on about y space is ne	our eded,
1.	Fill in your employn information.	nent		Debtor 1	Debtor 2	Debtor 2 or non-filing spouse				
	If you have more than	te page with		☐ Employed			☐ Empl	☐ Employed		
	attach a separate paginformation about ad		Employment status	■ Not employed			☐ Not e	☐ Not employed		
	employers.		Occupation	Paralegal						
	Include part-time, sea self-employed work.	asonal, or	Employer's name							
	Occupation may inclu homemaker, if it appl		Employer's address							
			How long employed th	nere?						
Par	t 2: Give Detail	s About Mont	hly Income							
	mate monthly income ss you are separated.	e as of the date	e you file this form. If y	ou have nothing to re	eport for an	y line, w	vrite \$0 in the sp	ace. Include	your non-fili	ng spouse
	u or your non-filing spore, attach a separate sh		than one employer, comb	bine the information	for all empl	oyers fo	or that person on	the lines belo	ow. If you ne	eed more
						F	or Debtor 1	For Debt non-filing		
2.			, and commissions (be culate what the monthly v		2.	\$	5,333.34	\$	N/A	
3.	Estimate and list me	onthly overtin	ne pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Inc	ome. Add line	2 + line 3.		4.	\$	5,333.34	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Debt Debt		Manzo, Robert P & Manzo, Grace C			number (if known)		
				For	Debtor 1	For Debt	or 2 or g spouse
	Сор	y line 4 here	4.	\$	5,333.34	\$	N/A
5.	List	all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,638.95	\$	N/A
	5b.	Mandatory contributions for retirement plans	5b.	<u>\$</u> —	0.00	\$	N/A
	5c.	Voluntary contributions for retirement plans	5c.	\$	294.99	\$	N/A
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A
	5e.	Insurance	5e.	\$	0.00	\$	N/A
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A
	5g.	Union dues	5g.	\$	0.00	\$	N/A
	5h.	Other deductions. Specify: Transcheck	5h.+	\$	118.08	+ \$	<u>N/A</u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	2,052.02	\$	N/A
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,281.32	\$	N/A
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		\$		\$	
	8d.	Unemployment compensation	8c. 8d.	\$ _	0.00	\$	N/A N/A
	8e.	Social Security	8e.	ς \$	0.00	\$	N/A
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	* <u> </u>	0.00	\$	N/A
	8g.	Pension or retirement income	— 8g.	\$_	0.00	\$	N/A
	8h.	Other monthly income. Specify:	8h.+	\$		+ \$	N/A
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	3	3,281.32 + \$_	N/	<u>'A</u> = \$ 3,281.32
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your dor friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not available.	ependen		·	Schedule J.	1. <b>+</b> \$ <b>0.00</b>
12.		the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certain.					
13.	Do y	ou expect an increase or decrease within the year after you file this form No.  Yes. Explain:	?				Combined monthly income

Official Form 106I Schedule I: Your Income page 2

Fill	in this information to identify your case:								
Deb	otor 1 Robert P Manzo	Check	t if this is:						
Dah			_	An amended filing	'a a a a a ta a t'il' a a a b a a tao <b>40</b>				
	ouse, if filing)  Grace C Manzo			a supplement snow expenses as of the f	ing postpetition chapter 13 following date:				
Linit	ted States Bankruptcy Court for the: EASTERN DISTRICT OF NEW		MM / DD / YYYY						
	· · · · · · · · · · · · · · · · · · ·	VIORR		WINT DD / TTTT					
	e numbernown)								
Of	fficial Form 106J								
	chedule J: Your Expenses				12/15				
Ве	as complete and accurate as possible. If two married people a				supplying correct				
	ormation. If more space is needed, attach another sheet to this known). Answer every question.	s form. On the top of a	ny additiona	il pages, write you	ir name and case number				
Par	t 1: Describe Your Household								
1.	Is this a joint case?								
	☐ No. Go to line 2.								
	Yes. Does Debtor 2 live in a separate household?								
	■ No								
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expense	es for Separate Househ	old of Debtor	2.					
2.	Do you have dependents? ☐ No								
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	•		Dependent's age	Does dependent live with you?				
	Do not state the				□ No				
	dependents names.	Son		6	Yes				
					□ No				
		Daughter		1 mo.	Yes				
					□ No				
					☐ Yes ☐ No				
					☐ Yes				
3.	Do your expenses include ■ No				<b>—</b> 100				
	expenses of people other than yourself and your dependents?								
	yoursell and your dependents?								
	t 2: Estimate Your Ongoing Monthly Expenses								
exp	imate your expenses as of your bankruptcy filing date unless penses as of a date after the bankruptcy is filed. If this is a sup plicable date.								
Incl	lude expenses paid for with non-cash government assistance	e if you know the							
	ue of such assistance and have included it on Schedule I: You ficial Form 106I.)	ur İncome		Your expe	enses				
(OII	iiciai Foriii 100i.)			7 0 0.1 0.1 0.1					
4.	The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.				1,320.00				
	If not included in line 4:								
	4a. Real estate taxes		4a. \$		0.00				
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00				
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00				
_	4d. Homeowner's association or condominium dues	homo ogvitu lasas	4d. \$		338.00				
5.	Additional mortgage payments for your residence, such as h	nome equity loans	5. \$		0.00				

	otor 1 otor 2	Manzo, F	Robert P & Manzo, Grace C	Case num	nber (if known)	
6.	Utilit	ies:				
	6a.	Electricity,	heat, natural gas	6a.	\$	375.00
	6b.	Water, sev	wer, garbage collection	6b.	· <del></del>	0.00
	6c.	•	e, cell phone, Internet, satellite, and cable services	6c.	\$	158.00
	6d.	Other. Spe		6d.	·	0.00
7.			ekeeping supplies	7.	·	1,250.00
8.			hildren's education costs	8.	· .	1,300.00
9.		•	ry, and dry cleaning	9.	·	500.00
10.	Pers	onal care p	roducts and services	10.	· .	150.00
11.			ntal expenses	11.	\$	150.00
	Do n	ot include ca	Include gas, maintenance, bus or train fare. ar payments.	12.	·	275.00
			clubs, recreation, newspapers, magazines, and books	13.	\$	400.00
14.	Char	ritable conti	ributions and religious donations	14.	\$	100.00
15.	Do no 15a.	Life insura		0. 15a.	\$	38.00
	15b.	Health ins	urance	15b.	\$	0.00
	15c.	Vehicle ins	surance	15c.	\$	159.00
			rance. Specify:	15d.	\$	0.00
	Spec	eify:	clude taxes deducted from your pay or included in lines 4 or	20. 16.	\$	0.00
17.			ease payments: ents for Vehicle 1	17a.	\$	0.00
	17b.	Car payme	ents for Vehicle 2	17b.	\$	0.00
	17c.	Other. Spe	ecify:	17c.	\$	0.00
	17d.	Other. Spe	ecify:	17d.	\$	0.00
18.			of alimony, maintenance, and support that you did not your pay on line 5, Schedule I, Your Income (Official Fo		\$	0.00
19.	Othe	er payments	s you make to support others who do not live with you.		\$	0.00
	Spec	· —		19.		
20.			erty expenses not included in lines 4 or 5 of this form o			
			on other property	20a.		0.00
		Real estate		20b.	·	0.00
	20c.		nomeowner's, or renter's insurance	20c.		0.00
			ce, repair, and upkeep expenses	20d.		0.00
0.4			er's association or condominium dues	20e.		0.00
21.	Othe	er: Specify:		21.	+\$	0.00
22.	Calc	ulate your r	monthly expenses			
	22a.	Add lines 4	through 21.		\$	6,513.00
	22b.	Copy line 22	2 (monthly expenses for Debtor 2), if any, from Official For	m 106J-2	\$	
	22c.	Add line 22a	a and 22b. The result is your monthly expenses.		\$	6,513.00
23.			monthly net income.			
	23a.	Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	3,281.32
	23b.	Copy your	monthly expenses from line 22c above.	23b.	-\$	6,513.00
	23c.		our monthly expenses from your monthly income. is your <i>monthly net income</i> .	23c.	\$	-3,231.68
24.	For ex modif	xample, do yo	an increase or decrease in your expenses within the year or do you expect to finish paying for your car loan within the year or do you terms of your mortgage?	ar after you file this to expect your mortgage p	form? payment to increas	se or decrease because of a
	■ N		[= · · ·			
	☐ Ye	es.	Explain here:			

	rmation to identify your	case.			
Debtor 1	Robert P Manzo				
	First Name	Middle Name	Last Name	<del></del> }	
Debtor 2	Grace C Manzo				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	EASTERN DISTRICT	OF NEW YORK		
Case number					
(if known)				☐ Check if th	
				amended	filing
Official For	m 106Dec				
		an Individus	I Debtor's Sched	lulos	
Deciara	tion About a	ili iliuiviuua	Depior 3 Scried	iules	12/15
	18 U.S.C. §§ 152, 1341, 19 gn Below				
Did you pa	ay or agree to pay some	one who is NOT an attor	rney to help you fill out bankrupto	cy forms?	
Did you pa	ay or agree to pay some	one who is NOT an atto	rney to help you fill out bankrupto	cy forms?	
■ No		one who is NOT an atto	rney to help you fill out bankrupto		rer's Notice
■ No	ay or agree to pay some  Name of person	one who is NOT an atto	rney to help you fill out bankrupto	cy forms?  Attach Bankruptcy Petition Prepar Declaration, and Signature (Officia	
■ No		one who is NOT an atto	rney to help you fill out bankrupto	Attach Bankruptcy Petition Prepar	
■ No □ Yes.  Under pena	Name of person  alty of perjury, I declare		rney to help you fill out bankrupto	Attach Bankruptcy Petition Prepar  Declaration, and Signature (Officia	
■ No □ Yes.  Under penathat they are	Name of person  alty of perjury, I declare re true and correct.		nmary and schedules filed with th	Attach Bankruptcy Petition Prepar Declaration, and Signature (Officia	
■ No □ Yes.  Under penathat they al	Name of person  alty of perjury, I declare re true and correct.		nmary and schedules filed with th	Attach Bankruptcy Petition Prepar Declaration, and Signature (Officia	
■ No □ Yes.  Under penathat they as  X /s/ Ro Robei	Name of person  alty of perjury, I declare re true and correct.		nmary and schedules filed with th	Attach Bankruptcy Petition Prepar Declaration, and Signature (Official is declaration and	

Fill	in this informat	tion to identify your o	ase:				
Deb	tor 1	Robert P Manzo					
		First Name	Middle Name	Last Name			
1	tor 2 use if, filing)	Grace C Manzo First Name	Middle Name	Last Name			
` `							
Unit	ed States Bank	ruptcy Court for the:	EASTERN DISTRICT C	OF NEW YORK			
Cas	e number						
(if kn	own)					_	eck if this is an
						am	ended filing
		n 106Sum Your Assets a	and Liabilities ar	nd Certain Statistic	cal Information		12/15
infor	mation. Fill out	t all of your schedule	s first; then complete the	are filing together, both are e e information on this form. If the box at the top of this pa	f you are filing amended		
Part	1: Summari	ize Your Assets					
						You	r assets
							e of what you own
1.		: Property (Official Fo					
	1a. Copy line 5	55, Total real estate, fr	om Schedule A/B			\$_	200,000.00
	1b. Copy line 6	62, Total personal prop	erty, from Schedule A/B			\$_	81,800.00
	1c. Copy line 6	63, Total of all property	on Schedule A/B			\$_	281,800.00
Part	2: Summari	ize Your Liabilities					
						You	r liabilities
							ount you owe
2.	Schedule D: C	reditors Who Have Cla	ims Secured by Property	(Official Form 106D)			
				e bottom of the last page of Pa	rt 1 of Schedule D	\$_	240,232.00
3.	Schedule E/F:	Creditors Who Have L	Insecured Claims (Official	Form 106E/F)			
	3a. Copy the t	total claims from Part 1	(priority unsecured claim	s) from line 6e d3chedule E/F.		\$_	0.00
	3b. Copy the t	total claims from Part 2	? (nonpriority unsecured c	laims) from line 6j &chedule E	E/F	\$	38,104.00
					Your total liabilities	\$	278,336.00
							<u>,                                      </u>
Part	3: Summari	ize Your Income and	Expenses				
4.		our Income(Official Forn nbined monthly income				\$	3,281.32
5.	Schodula I: V	our Expenses (Official	Form 106 I)			_	
J.						\$_	6,513.00
Part	4: Answer 1	These Questions for I	Administrative and Statis	stical Records			
6.			r Chapters 7, 11, or 13? In this part of the form. Che	eck this box and submit this for	m to the court with your o	ther sche	edules.
	■ Yes						
7.		debt do you have?					
				lebts are those "incurred by an ical purposes. 28 U.S.C§ 159.		ersonal,	family, or household
		ots are not primarily of your other schedules.	onsumer debts. You hav	e nothing to report on this part	of the form. Check this bo	ox and su	ubmit this form to the

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

Debto Debto	Manzo, Robert P & Manzo, Grace C	Case number (if known)	
	From the Statement of Your Current Monthly Income: Copy your 22A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.		\$ 9,119.88

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Fill in	this informa	ation to identify you	r case:				
Debtoi		Robert P Manzo					
		First Name	Middle Name		Last Name		
Debtoi (Spouse	r 2 if, filing)	Grace C Manzo First Name	Middle Name		Last Name		
		kruptcy Court for the:	EASTERN DISTRICT OF	F NEW `	YORK		
		Mapley Court for the.			· Ottit		
Case r	number						Check if this is an
							amended filing
∩ffic	cial For	m 107					
			Affairs for Indivi	duals	s Filina for B	ankruptcy	4/16
Be as o	complete an ation. If mo wn). Answe	d accurate as possi re space is needed, r every question.	ble. If two married people a	re filing his form	together, both are ed n. On the top of any a	qually responsible for suppl additional pages, write your	
	•			Liveu	<u> serore</u>		
1. W		current marital statu	s?				
	I Married I Not marr	ied					
				_			
2. Du	uring the las	st 3 years, have you	lived anywhere other than	where y	ou live now?		
	No Yes. List	all of the places you li	ved in the last 3 years. Do not	include	where you live now.		
D	ebtor 1 Price	or Address:	Dates Debtor 1 there	lived	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
						ty property state or territory co, Texas, Washington and Wi	
	l No						
	l Yes. Mak	e sure you fill out Sch	edule H: Your Codebtors (Off	icial Forr	m 106H).		
Part 2	Explain	the Sources of You	r Income				
Fil	Il in the total you are filing	amount of income yo	nployment or from operatin u received from all jobs and a nave income that you receive t	all busine	esses, including part-t		dar years?
			Debtor 1			Debtor 2	
			Sources of income Check all that apply.	(befo	ss income ore deductions and usions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
			☐ Wages, commissions, bonuses, tips		\$84,633.00	☐ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a business			☐ Operating a business	
			☐ Wages, commissions, bonuses, tips		\$85,000.00	☐ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a business			☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Official Form 107

	btor 1 btor 2 Ma	anzo, Rob	ert P & Manzo, Gra	ice C		Ca	ase number (if known)		
			Debtor	1			Debtor 2		
			Source	es of income all that apply.	(befo	s income re deductions and sions)	Sources of inc		Gross income (before deductions and exclusions)
			☐ Wag bonuse	ges, commissions, s, tips		\$27,000.00	☐ Wages, combonuses, tips	nmissions,	\$0.00
			☐ Ope	rating a business			Operating a	business	
5.	Include incoother public you are filing.  List each some No	come regard c benefit pa ng a joint ca	yments; pensions; renta se and you have income he gross income from e	ome is taxable. Exam al income; interest; dive that you received too	iples of <i>o</i> vidends; gether, lis	ther income are ali money collected fro st it only once unde	mony; child support; om lawsuits; royalties or Debtor 1.	; and gambli	urity, unemployment, and ng and lottery winnings. I
	⊔ Yes.	Fill in the de	etails.						
			Debtor Source Describ	s of income	each (befo	s income from source re deductions and sions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
	No. ■ Yes.	individual puring the No. Yes	creditor. Do not inclupayments to an attorr to adjustment on 4/01/1 or Debtor 2 or both ha 90 days before you file.  Go to line 7.  List below each credi	family, or household of for bankruptcy, did tor to whom you paid de payments for doney for this bankruptc 9 and every 3 years a ve primarily consuld for bankruptcy, did tor to whom you paid ic support obligations	purpose.  you pay a  a total of mestic su cy case. after that mer deb you pay a  a total of	any creditor a total  \$6,425* or more in inport obligations, for cases filed on our cases filed on cases.  any creditor a total	of \$6,425* or more?  In one or more payme such as child support after the date of act of \$600 or more?	ents and the took and alimore dispersion of the took and	otal amount you paid tha ny. Also, do not include
	Creditor'	s Name and	d Address	Dates of payme	ent	Total amount paid	Amount you still owe	Was this	payment for
7.	Insiders in which you business y	clude your ro are an office ou operate a	you filed for bankrup elatives; any general par er, director, person in co as a sole proprietor. 11 l	rtners; relatives of any entrol, or owner of 20%	y general % or mor	nt on a debt you on the partners; partners e of their voting sec	hips of which you are curities; and any man	e a general pa naging agent,	artner; corporations of including one for a
		Name and		Dates of payme	ent	Total amount paid	Amount you still owe	Reason fo	or this payment

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an

Case 1-16-42819-cec Doc 1 Filed 06/25/16 Entered 06/25/16 20:59:40

	btor 1 btor 2 Manzo, Robert P & Manzo, Grad	Cas	se number (if known)			
	insider? Include payments on debts guaranteed or cosig	ned by an insider.				
	<ul><li>■ No</li><li>□ Yes. List all payments to an insider</li></ul>					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
Pa	rt 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury of and contract disputes.					
	□ No ■ Yes. Fill in the details.					
	Case title	Nature of the case	Court or agency		Status of th	e case
	Case number Civil Court Richmond County	consumer debt				
	Discover Bank v. Grace Manzo 6R00606				☐ On appeal ☐ Concluded	
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.  Creditor Name and Address		arty repossessed, re	Date	ou, unadriou,	Value of the
		Explain what happene	d			property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca  ■ No □ Yes. Fill in the details.		luding a bank or fina	ancial institution,	set off any am	ounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date taken	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an □ No □ Yes	cy, was any of your propo nother official?	erty in the possessio	on of an assignee	for the benefi	t of creditors, a
Pai	rt 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup	tcy, did you give any gift	s with a total value o	of more than \$600	per person?	
	Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 person	per Describe the gifts		Dates the g	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:			9		

	Manzo, Robert P & Manzo, Gra	ace C	C	ase number	(if known)	
14.	Within 2 years before you filed for bankru  ■ No □ Yes. Fill in the details for each gift or core			with a total	value of more than \$6	600 to any charity?
	☐ Yes. Fill in the details for each gift or col Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	otal	Describe what you contributed		Dates you contributed	Value
	t 6: List Certain Losses					Con all on Paraton
	Within 1 year before you filed for bankrup or gambling?	otcy or	since you filed for bankruptcy, did you	u lose anyti	ning because of theft,	fire, other disaster,
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	ibe any insurance coverage for the lose the amount that insurance has paid. Lise nee claims on line 33 of Schedule A/B: Pr	st pending	Date of your loss	Value of property lost
Pari	17: List Certain Payments or Transfers					
	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or p Include any attorneys, bankruptcy petition pre  No Yes. Fill in the details.  Person Who Was Paid Address	reparin	g a bankruptcy petition?	s required in	your bankruptcy.  Date payment or	Amount of
	Email or website address Person Who Made the Payment, if Not Yo	ou	transferred		transfer was made	payment
	Greenpath		100			\$0.00
	Kevin B Zazzera 182 Rose Avenue Staten Island, NY 10306		2750			\$0.00
	Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that you	itors or	to make payments to your creditors?		r transfer any propert	y to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any proper transferred	rty	Date payment or transfer was made	Amount of payment
	Within 2 years before you filed for bankru transferred in the ordinary course of your Include both outright transfers and transfers rigifts and transfers that you have already listed.  No	r <b>busin</b> made as	ess or financial affairs? s security (such as the granting of a secur	,	,	,
	Yes. Fill in the details.  Person Who Received Transfer		Description and value of		any property or	Date transfer was
	Address  Person's relationship to you		property transferred	payments paid in ex	s received or debts cchange	made

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a

No Yes. Fill in t Name of trust  Part 8: List of Ce  O. Within 1 year be sold, moved, or Include checkin	nese are often called asset-prote he details. rtain Financial Accounts, Inst	Description and	value of the pro			
Dart 8: List of Ce  District States of Ce  List of Ce	rtain Financial Accounts, Inst	Description and	value of the pro			
). Within 1 year be sold, moved, or Include checkin	rtain Financial Accounts, Inst		•	perty trans	ferred	Date Transfer was made
sold, moved, or Include checkin		ruments, Safe Deposit	Boxes, and Sto	rage Units		
houses, pension No Yes. Fill in	g, savings, money market, or n funds, cooperatives, associ	other financial accour	nts; certificates	of deposit;		
	cial Institution and r, Street, City, State and ZIP	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfe
Do you now have cash, or other v	re, or did you have within 1 ye aluables?	ear before you filed for	r bankruptcy, ar	y safe depo	osit box or other depos	itory for securities,
■ No □ Yes. Fill in	the details.					
Name of Finance Address (Number	cial Institution r, Street, City, State and ZIP Code)	Who else had ac Address (Number, and ZIP Code)		Describe	the contents	Do you still have it?
2. Have you stored	d property in a storage unit or	place other than your	r home within 1	year before	you filed for bankrupto	cy?
■ No						
☐ Yes. Fill in		Who else has or	had access	Dosoribo	the contents	Do you still
Name of Storag Address (Numbe	r, Street, City, State and ZIP Code)	to it? Address (Number, and ZIP Code)		Describe	the contents	Do you still have it?
art 9: Identify P	roperty You Hold or Control f	or Someone Else				
3. Do you hold or o someone.	control any property that som	neone else owns? Inclu	ude any propert	y you borro	owed from, are storing f	or, or hold in trust for
■ No □ Yes. Fill in	the details.					
Owner's Name Address (Numbe	r, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property	Value
art 10: Give Deta	ils About Environmental Infor	mation				
or the purpose of P	art 10, the following definition	ns apply:				
	aw means any federal. state.	PF-7 ·				

- toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Debtor 1

	otor 1 otor 2		e C		Case number (if known)	
24.	Has	any governmental unit notified you that	t you may be liable	or potentially liable	under or in violation of an environm	ental law?
		No Yes. Fill in the details.				
		me of site dress (Number, Street, City, State and ZIP Code)	Government Address (Nur ZIP Code)	tal unit mber, Street, City, State ar	Environmental law, if you know it	Date of notice
25.	Hav	e you notified any governmental unit of	any release of haza	ardous material?		
		No Yes. Fill in the details.				
		me of site dress (Number, Street, City, State and ZIP Code)	Address (Nur ZIP Code)	tal unit mber, Street, City, State ar	Environmental law, if you know it	Date of notice
26.	Hav	e you been a party in any judicial or adn	ninistrative proceed	ding under any envi	ronmental law? Include settlements	and orders.
		No Yes. Fill in the details.				
		se Title se Number	Court or age Name Address (Nur and ZIP Code)	ency mber, Street, City, State	Nature of the case	Status of the case
Par	t 11:	Give Details About Your Business or	Connections to Any	y Business		
	■ □	☐ A sole proprietor or self-employed in ☐ A member of a limited liability comp ☐ A partner in a partnership ☐ An officer, director, or managing exc ☐ An owner of at least 5% of the voting No. None of the above applies. Go to P Yes. Check all that apply above and fill siness Name	ecutive of a corporage or equity securition Part 12.	d liability partnershi ation es of a corporation	ip (LLP)	<b>n</b> er
	Add	dress mber, Street, City, State and ZIP Code)		ant or bookkeeper	Do not include Social Securit  Dates business existed	
28.		nin 2 years before you filed for bankrupt itutions, creditors, or other parties.	cy, did you give a f	inancial statement t	to anyone about your business? Incl	ude all financial
		No				
		Yes. Fill in the details below.				
		me dress mber, Street, City, State and ZIP Code)	Date Issued			
Par	t 12:	Sign Below				
true banl	and krupt	ad the answers on this Statement of Final correct. I understand that making a false tcy case can result in fines up to \$250,00 . §§ 152, 1341, 1519, and 3571.	e statement, conce	aling property, or ob	btaining money or property by fraud	
		ert P Manzo		ce C Manzo		
		P Manzo re of Debtor 1		C Manzo e of Debtor 2		
Dat	e _	June 24, 2016	_ Date _	June 24, 2016		

Official Form 107

Case 1-16-42819-cec Doc 1 Filed 06/25/16 Entered 06/25/16 20:59:40

Debtor 1 Debtor 2	Manzo, Robert P & Manzo, Grace C	Case number (if known)
■ No	tach additional pages to Your Statement of Financial Affairs for Individuals	Filing for Bankruptcy (Official Form 107)?
, ,	ay or agree to pay someone who is not an attorney to help you fill out bankr	uptcy forms?
■ No □ Yes. Na	me of Person . Attach the Bankruptcy Petition Preparer's Notice, Declarate	ion, and Signature (Official Form 119).

Official Form 107

Fill in this inform				irected ir	n this form and i	n Form
Debtor 1	Robert P Manzo	122A-1Sı	nbb:			
Debtor 2 (Spouse, if filing)	Grace C Manzo	□ 1. T	here is no pres	umption	of abuse	
	Bankruptcy Court for the: Eastern District of New York	á		nade und	nine if a presump der <i>Chapter 7 Me</i> n 122A-2).	
(if known)			he Means Test military service b		apply now beca d apply later.	use of qualified
		☐ Ch	eck if this is a	an amen	nded filing	
Official F	<u>orm 122A - 1</u>					
Chapter	7 Statement of Your Current Monthly In	come	е			12/15
a separate sheet number (if known military service,	and accurate as possible. If two married people are filing together, both are equito this form. Include the line number to which the additional information applien). If you believe that you are exempted from a presumption of abuse because complete and file Statement of Exemption from Presumption of Abuse Under § Iculate Your Current Monthly Income	es. On the you do no	top of any addit t have primarily	ional pag consume	es, write your na r debts or becau	me and case se of qualifying
1. What is y	our marital and filing status? Check one only.					
☐ Not ma	arried. Fill out Column A, lines 2-11.					
■ Marrie	d and your spouse is filing with you. Fill out both Columns A and B, line	s 2-11.				
☐ Marrie	d and your spouse is NOT filing with you. You and your spouse are:					
I	ng in the same household and are not legally separated. Fill out both C		•			
per	ng separately or are legally separated. Fill out Column A, lines 2-11; do lalty of perjury that you and your spouse are legally separated under nonbank art for reasons that do not include evading the Means Test requirements. 11 L	ruptcy lav	w that applies or	_		
101(10A). For 6 months, add	erage monthly income that you received from all sources, derived during the 6 example, if you are filing on September 15, the 6-month period would be March 1 the Income for all 6 months and divide the total by 6. Fill in the result. Do not include rental property, put the income from that property in one column only. If you have no	rough Aug any incor	ust 31. If the amo	unt of you han once.	r monthly income . For example, if b	varied during the
		Colur. Debto		Colum Debto non-fil		
payroll ded	•	\$	4,923.08	\$	4,196.80	
	and maintenance payments. Do not include payments from a spouse if is filled in.	\$	0.00	\$	0.00	

2.	payroll deductions).	and co	mmissio	ns (before all	\$ 4,923.08	\$ 4,196.80
3.	<b>Alimony and maintenance payments.</b> Do not include Column B is filled in.	payme	ents from a	a spouse if	\$ 0.00	\$ 0.00
4.	All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household, roommates. Include regular contributions from a spous Do not include payments you listed on line 3	. Includ your d	le regular ependents	contributions , parents, and	0.00	\$ 0.00
5.	Net income from operating a business, profession,	or farn	n			
			Dek	otor 1		
	Gross receipts (before all deductions)	\$	0.00			
	Ordinary and necessary operating expenses	-\$	0.00			
	Net monthly income from a business, profession, or far	m \$ _	0.00	Copy here ->	\$ 0.00	\$ 0.00
6.	Net income from rental and other real property					
			Dek	otor 1		
	Gross receipts (before all deductions)	\$	0.00			
	Ordinary and necessary operating expenses	-\$	0.00			
	Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$ 0.00	\$ 0.00
7.	Interest, dividends, and royalties				\$ 0.00	\$ 0.00
	-					

Official Form 122A-1

Debtor 1 Debtor 2	Manzo, Robert P & Manzo, Grace C			Case number	er (if known)			
				Column A Debtor 1		Column B Debtor 2 o	or	
8. Uner	mployment compensation			\$	0.00	\$	0.00	
	ot enter the amount if you contend that the amount ral Security Act. Instead, list it here:	received was a benefit	under the					
Fo	or you	5	0.00					
Fo	or your spouse		0.00					
unde	sion or retirement income. Do not include any ame r the Social Security Act.			\$	0.00	\$	0.00	
not in a vict	me from all other sources not listed above. Spenclude any benefits received under the Social Securiting of a war crime, a crime against humanity, or intepessary, list other sources on a separate page and processory.	ity Act or payments re rnational or domestic t	ceived as					
	·			\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
	ulate your total current monthly income. Add lin column. Then add the total for Column A to the to		\$	4,923.08	+ \$ _	4,196.80	= \$	9,119.88
Part 2:	Determine Whether the Means Test Applies to	o You					incom	<del>•</del>
12. Calc	ulate your current monthly income for the year.	. Follow these steps:						
12a.	Copy your total current monthly income from line	11		Сор	y line 11	here=>	\$	9,119.88
	Multiply by 12 (the number of months in a year)						X ′	 12
12b.	The result is your annual income for this part of the	form				12	b. \$10	09,438.56
13. <b>Calc</b>	ulate the median family income that applies to y	you. Follow these step	os:					
Fill in	the state in which you live.	NY	]					
Fill in	the number of people in your household.	4	]					
To fir	n the median family income for your state and size and a list of applicable median income amounts, go . This list may also be available at the bankruptcy of	online using the link	specified ir	n the separa	te instruc	. 13 tions for this	. \$	38,642.00
14. <b>How</b>	do the lines compare?							
14a.	☐ Line 12b is less than or equal to line 13. C Go to Part 3.	on the top of page 1, o	check box	1T,here is no	presumpt	ion of abuse.		
14b.	Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box	2Ţhe presu	ımption of al	buse is de	termined by F	Form 122A	-2.
art 3:	Sign Below							
	By signing here, I declare under penalty of perjury t	hat the information on	this statem	nent and in a	ny attachr	ments is true	and correc	í.
)	( <u>/s/ Robert P Manzo</u>	X	/s/ Grad	e C Manz	0			
	Robert P Manzo			Manzo				
Det	Signature of Debtor 1	Data	June 24	of Debtor 2	<u> </u>			
Dal	e June 24, 2016 MM / DD / YYYY	Date	MM / DD	/ YYYY				
	If you checked line 14a, do NOT fill out or file Form	m 122A-2.						
	If you checked line 14b, fill out Form 122A-2 and f	ile it with this form.						

Official Form 122A-1

Debtor 1

		_		
Fill	in this information to identify your case:		Check the appropriat ines 40 or 42:	e box as directed in
Deb	Robert P Manzo			
	otor 2 Grace C Manzo ouse, if filing)		According to the calcustatement:	llations required by this
` .	ted States Bankruptcy Court for the: Eastern District of New York		■ 1. There is no pres	sumption of abuse.
			☐ 2. There is a presu	umption of abuse.
	se number nown)			
			Check if this is an a	amended filing
	ficial Form 122A - 2			
Ch	napter 7 Means Test Calculation			04/1
To fi	ill out this form, you will need your completed copy of Chapter 7 Statement of	of Your Current M	onthly Income (Official	Form 122A-1).
D	a complete and accounts as wealthly lifeture manufacture and are filling to eath	b.ath.ana.anall		
is ne	is complete and accurate as possible. If two married people are filing togethe eeded, attach a separate sheet to this form, Include the line number to which			
write	e your name and case number (if known).			
Par	t 1: Determine Your Adjusted Income			
1.	Copy your total current monthly income. Copy line 11 from	n Official Form 12	2A-1 here=> \$	9,119.88
2.	Did you fill out Column B in Part 1 of Form 122A-1?			
	☐ No. Fill in \$0 for the total on line 3.			
	■ Yes. Is your spouse Filing with you?			
	☐ No. Go to line 3.			
	Yes. Fill in \$0 the total on line 3.			
3.	Adjust your current monthly income by subtracting any part of your spous household expenses of you or your dependents. Follow these steps:	se's income not us	ed to pay for the	
	On line 11, Column B of Form 122A-1, was any amount of the income you report you or your dependents?	ed for your spouse N	NOT regularly used for the	ne household expenses of
	■ No. Fill in 0 for the total on line 3.			
	Yes. Fill in the information below:			
	State each purpose for which the income was used	Fill in the amou		
	For example, the income is used to pay your spouse's tax debt or to support other than you or your dependents.	are subtracting your spouse's		
	Support Sailer Main Jose St. Josef Supports Mon.	\$		
			_	
		\$	_	
		\$		
		¢ 0.0	 ^	
	Total.	\$	<u> </u>	
			Copy total here=>.	·· - \$0.00
4.	Adjust your current monthly income. Subtract line 3 from line 1.			\$ 9,119.88
	•			

Official Form 122A-2

Case 1-16-42819-cec Doc 1 Filed 06/25/16 Entered 06/25/16 20:59:40

Debtor Debtor		Case number (if known)					
Part 2	Calculate Your Deductions from Your Income						
ans		ocal Standards for certain expense amounts. Use these amounts to ards, go online using the link specified in the separate instructions are bankruptcy clerk's office.					
act		of your actual expense. In later parts of the form, you will use some of your deduct any amounts that you subtracted fro your spouse's income in line 3 from in income in lines 5 and 6 of form 122A-1.					
If y	If your expenses differ from month to month, enter the average expense.						
Wh	nenever this part of the from refers to you, it means both you	u and your spouse if Column B of Form 122A-1 is filled in.					
5.	The number of people used in determining your dedu	uctions from income					
	Fill in the number of people who could be claimed as exemnumber of any additional dependents whom you support. The people in your household.						
Na	tional Standards You must use the IRS Nationa	al Standards to answer the questions in lines 6-7.					
6.	Food, clothing, and other items: Using the number of pfill in the dollar amount for food, clothing, and other items	people you entered in line 5 and the IRS National Standards, \$					
7.	the dollar amount for out-of-pocket health care. The number	per of people you entered in line 5 and the IRS National Standards, fill in oper of people is split into two categoriespeople who are under 65 and higher IRS allowance for health care costs. If your actual expenses are onal amount on line 22.					
Pe	ople who are under 65 years of age						
	7a. Out-of-pocket health care allowance per person	\$ <b>60</b> _					
	7b. Number of people who are under 65	X4					
	7c. <b>Subtotal.</b> Multiply line 7a by line 7b.	\$\$ Copy here=> \$240.00					
Pe	ople who are 65 years of age or older						
	7d. Out-of-pocket health care allowance per person	\$144_					
	7e. Number of people who are 65 or older	×0_					
	7f. <b>Subtotal.</b> Multiply line 7d by line 7e.	\$ Copy here=> +\$ 0.00					
	7g. T <b>otal.</b> Add line 7c and line 7f	\$\$ Copy total here=> \$\$					

Debtor 2		/lanzo, R	Robert P &	Manzo, Gra	ice C		_	Case number	r (if known)			
Loc	al St	andards	You must	use the IRS Lo	ocal Standards to	answer the	questions in line	es 8-15.				
		n informa s into two		he IRS, the U.S	S. Trustee Progr	am has divi	ded the IRS Lo	cal Standaı	rd for housir	ng for bank	ruptcy	
	Hous	ing and u	ıtilities - Ins	urance and or	perating expense	es						
	Hous	ing and u	ıtilities - Mo	rtgage or rent	expenses							
То	answ	er the qu	estions in I	ines 8-9, use t	he U.S. Trustee	Program ch	art.					
					cified in the sepa otcy clerk's office.		ons for this form	1.				
8.					operating expen or insurance and c					5, fill in \$_		792.00
9.	Ηοι	using and	l utilities - N	Nortgage or re	nt expenses:							
	9a.	_			ntered in line 5, fil or rent expenses				\$	2,292.00		
	9b.	Total ave	erage month	ly payment for a	all mortgages and	other debts	secured by your	home.				
		contracti		each secured c	thly payment, addreditor in the 60 m							
		Name of	f the creditor	r		Avera	ge monthly ent					
		Wells	Fargo Hm	Mortgag		\$	1,320.00					
				Total average	e monthly paymen	t \$	1,320.00	Copy here=>	-\$	1,320.00	Repeat this amount on line 33a.	
	9c.	Net mort	tgage or rent	expense.								
					othly paymen) from s than \$0, enter \$			\$	972.0	Copy here=>	\$	972.00
10.					gram's division o y expenses, fill i				is incorrect	and	\$	0.00
	Ex	plain why:	: <u> </u>									
11.	Loc	al transp	ortation ex	penses: Check	the number of ve	ehicles for wh	nich you claim an	n ownership	or operating	expense.		
		0. Go to lir	ne 14.									
	<b>.</b>	1. Go to lir	ne 12.									
		2 or more.	. Go to line 1	12.								
12.					IRS Local Standa apply for your Ce					the operatin	g \$	342.00

ebtor 1 ebtor 2	M	anzo, Robert P & Manzo, Grace C		Case numbe	er (if known)		
13.	may	cle ownership or lease expense: Using the IRS Local not claim the expense if you do not make any loan or leas ehicles.					
Ve	hicle '	Describe Vehicle 1:					
13a.	Own	ership or leasing costs using IRS Local Standard		\$	517.00		
13b.		age monthly payment for all debts secured by Vehicle 1. of include costs for leased vehicles.					
	contr	alculate the average monthly payment here and on line actually due to each secured creditor in the 60 months af divide by 60.					
		Name of each creditor for Vehicle 1	Average monthly payment				
		-NONE-	\$\$				
		Total Average Monthly Payment	\$0.00	Copy here =>	-\$	Repeat this amount on line 33b.	
13c.		ehicle 1 ownership or lease expense ract line 13b from line 13a. if this amount is less than \$0	), enter \$0	s	517.00	Copy net Vehicle 1 expense here => \$	517.00
Ve	hicle 2	2 Describe Vehicle 2:					
13d.	Own	ership or leasing costs using IRS Local Standard		\$	0.00		
13e.		age monthly payment for all debts secured by Vehicle 2. I d vehicles.	Do not include costs for				
		Name of each creditor for Vehicle 2	Average monthly payment				
	-		\$				
		Total Average Monthly Payment	\$	Copy here => -\$	0.0	Repeat this amount on line 33c.	
13f.		ehicle 2 ownership or lease expense ract line 13e from line 13d. if this amount is less than \$0	), enter \$0	\$	0.00	Copy net Vehicle 2 expense here => \$	0.00
14.		ic transportation expense: If you claimed 0 vehicles in sportation expense allowance regardless of whether you			ards, fill in th <i>eu</i>	blic \$	0.00
15.	dedu	tional public transportation expense: If you claimed out a public transportation expense, you may fill in what you than the IRS Local Standard for Public Transportation.					0.00

Debtor 1 Debtor 2

Manzo

, Robert P & Manzo, Grace C	Case number (if known)	

Oth	er Necessary Expenses	In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.		
16.	self-employment taxes, Sociation your pay for these taxes. How	nount that you will actually owe for federal, state and local taxes, such as income taxes, al Security taxes, and Medicare taxes. You may include the monthly amount withheld from wever, if you expect to receive a tax refund, you must divide the expected refund by 12 and le total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, sa	ales, or use taxes.	\$	2,519.70
17.	Involuntary deductions: T union dues, and uniform cos	the total monthly payroll deductions that your job requires, such as retirement contributions, sts.		
	Do not include amounts that	are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	349.94
18.	together, include payments t	onthly premiums that you pay for your own term life insurance. If two married people are filing hat you make for your spouse's term life insurance. Do not include premiums for life insurance on-filing spouse's life insurance, or for any form of life insurance other than term.	\$	0.00
19.	Court-ordered payments: agency, such as spousal or	The total monthly amount that you pay as required by the order of a court or administrative child support payments.		
	Do not include payments or	past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total month	ly amount that you pay for education that is either required:		
	for your physically or mer	ntally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total monthly	y amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.		
	Do not include payments for	any elementary or secondary school education.	\$	1,300.00
22.	required for the health and w	<b>Denses, excluding insurance costs:</b> The monthly amount that you pay for health care that is yelfare of you or your dependents and that is not reimbursed by insurance or paid by a health only the amount that is more than the total entered in line 7.		
	Payments for health insurance	ce or health savings accounts should be listed only in line 25.	\$_	0.00
23.	you and your dependents, su	<b>lephone services:</b> The total monthly amount that you pay for telecommunication services for uch as pagers, call waiting, caller identification, special long distance, or business cell phone ary for your health and welfare or that of your dependents or for the production of income, if it imployer.		
		r basic home telephone, internet and cell phone service. Do not include self-employment ported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$_	0.00
24.	Add all of the expenses all Add lines 6 through 23.	lowed under the IRS expense allowances.	\$	8,545.64

Debtor 1 Debtor 2 Manzo, Robert P & Manzo, Grace C

Case number (if known)

Add	Additional Expense Deductions These are additional deductions allowed by the Means Test.						
		Note: Do not include ar	ny expense allowances lis	sted in lines 6-24.			
25.		n insurance, disability insurance, and health sance, disability insurance, and health savings accourdents.					
	Health	insurance	\$14.92				
	Disabi	lity insurance	\$0.00_				
	Health	savings account	+ \$0.00				
	Total		\$14.92	Copy total here=>	\$	14.92	
	Do you	u actually spend this total amount?					
		No. How much do you actually spend?					
		Yes	\$				
26.	continu housel	nued contributions to the care of household or ue to pay for the reasonable and necessary care and hold or member of your immediate family who is una outions to an account of a qualified ABLE program. 2	d support of an elderly, c able to pay for such expe	hronically ill, or disabled member of your	\$	0.00	
27.		ction against family violence. The reasonably nead your family under the Family Violence Prevention					
	By law	, the court must keep the nature of these expenses	confidential.		\$	0.00	
28.	Additi	onal home energy costs. Your home energy costs	s are included in your ins	surance and operating expenses on line 8.			
		pelieve that you have home energy costs that are median the excess amount of home energy costs.	ore than the home energ	y costs included in expenses on line 8,			
		ust give your case trustee documentation of your acd is reasonable and necessary.	ctual expenses, and you i	must show that the additional amount	\$	0.00	
29.	\$160.4	ation expenses for dependent children who are 12* per child) that you pay for your dependent childrontary or secondary school.					
		ust give your case trustee documentation of your action and necessary and not already accounted for i		must explain why the amount claimed is			
	* Subje	ect to adjustment on 4/01/19, and every 3 years after	er that for cases begun o	n or after the date of adjustment.	\$	0.00	
30.	than th	onal food and clothing expense. The monthly an ne combined food and clothing allowances in the I od and clothing allowances in the IRS National Sta	RS National Standards.				
		d a chart showing the maximum additional allowance rm. This chart may also be available at the bankrupt	-	specified in the separate instructions for			
	You m	ust show that the additional amount claimed is reas	onable and necessary.		\$	0.00	
31.		nuing charitable contributions. The amount that ments to a religious or charitable organization. 26 U.		ibute in the form of cash or financial	+\$	0.00	
32.		II of the additional expense deductions. nes 25 through 31.			\$	14.92	

Debtor 1 Debtor 2 Manzo, Robert P & Manzo, Grace C

nzo, Robert P & Manzo, Grace C	Case number (if known)	

Deductions for Debt Payment								
33. For debts that are secured by an interest in and other secured debt, fill in lines 33a thr	ough 33e.							
To calculate the total average monthly paymen the 60 months after you file for bankruptcy. The		each se	cured creditor in					
Mortgages on your home:					erage monthly yment			
33a. Copy line 9b here			<b></b>	÷ \$_	1,320.00			
Loans on your first two vehicles:								
33b. Copy line 13b here			=	<b>&gt;</b> \$ _	0.00			
33c. Copy line 13e here			=	» \$_	0.00			
33d. List other secured debts:								
Name of each creditor for other secured debt	Identify property that secures the debt		Does payment include taxes of insurance?					
			□ No					
-NONE-			☐ Yes	\$				
			<b>-</b>	-				
			□ No					
			☐ Yes	\$ _				
			□ No					
			☐ Yes	+\$				
33e. Total average monthly payment. Add lines	33a through 33d	\$	1,320.00	Copy total here=>	\$1,320.00			
34. Are any debts that you listed in line 33 sec other property necessary for your support		, or		J				
No. Go to line 35.								
☐ Yes. State any amount that you must paline 33, to keep possession of your 60 and fill in the information below.	ay to a creditor, in addition to the payments lisproperty (called the cure amount). Next, divide							
Name of the creditor	dentify property that secures the debt		Total cure amount		Monthly cure amount			
-NONE-		\$ _	÷	60 = \$				
				1				
	Total	\$	0.00	Copy total here=>	\$			
	85. Do you owe any priority claims such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.							
■ No. Go to line 36.								
☐ Yes. Fill in the total amount of all of thes priority claims, such as those you I		ngoing						
Total amount of all past-due prior	ity claims	\$	0.00	÷ 60 =	\$			

Manzo, Robert P & Ma	nzo, Grace C		Case n	umber (if known	n)		
	under Chapter 13? 11 U.S.C. § 1 e using the link fo <i>Bankruptcy Basic</i> uptcy Basics may also be available	s specified in		ce.			
■ No. Go to line 37.							
☐ Yes. Fill in the following in	formation.						
	an payment if you were filing under	Chapter 13	\$				
Administrative Office	your district as stated on the list iss of the United States Courts (for d or by the Executive Office for United	istricts in Ala					
	ct multipliers that includes your dis eparate instructions for this form. uptcy clerk's office.				Co	py total	
Average monthly adn	ninistrative expense if you were filing	g under Cha <sub>l</sub>	oter 13	\$		re=> \$	
37. Add all of the deductions fo Add lines 33e through 36.	r debt payment.					\$	1,320.00
Total Deductions from Income							
8. Add all of the allowed deduct	ions.						
Copy line 24, All of the expens		\$	8,545.64				
	nal expense deductions	\$					
		· —	14.92				
Copy line 37, All of the deduct	ions for debt payment	+\$	1,320.00	_			
	Total deductions	\$	9,880.56	Copy total	here	=> \$	9,880.56
t 3: Determine Whether The	re is a Presumption of Abuse						
9. Calculate monthly disposable	e income for 60 months						
39a. Copy line 4, adjusted cur	rent monthly income	\$	9,119.88				
39b. Copy line 38,Total deduc		- \$	9,880.56				
39c. Monthly disposable incor Subtract line 39b from lin		\$	0.00	Copy here=>\$		0.00	
For the next 60 months (5 yea	rs)				x 60		
39d. <b>Total.</b> Multiply line 39c b	y 60		\$	0.00	Copy here=>	\$	0.00
0. Find out whether there is a p	resumption of abuse. Check the l	box that app	les:		_		
■ The line 39d is less than \$	<b>67,700*.</b> On the top of page 1 of this	s form, checl	k box 1, There is	no presum	otion of abu	se. Go to Par	t 5.
_	\$12,850*. On the top of page 1 of						
_	,700*, but not more than \$12,850	* Go to line	<b>4</b> 1				
	19, and every 3 years after that for			e of adjustm	ent		

Debtor 2	Man	zo, Robert P & Manzo, Grace C	_	Case number (if known)
41.	41a.	Fill in the amount of your total nonpriority unsecured de Summary of Your Assets and Liabilities and Certain Statistic Schedules (Official Form 106Sum), you may refer to line 3b	al Information	ut <i>A</i> 41a. \$ X .25
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C.		
		Multiply line 41a by 0.25		
of	your (	ne whether the income you have left over after subtracting unsecured, nonpriority debt.  e box that applies:	g all allowed ded	luctions is enough to pay 25%
		<b>39d is less than line 41b.</b> On the top of page 1 of this form, of Part 5.	check box 1, There	e is no presumption of abuse.
		<b>39d is equal to or more than line 41b.</b> On the top of page 1 e. You may fill out Part 4 if you claim special circumstances.		
Part 4:	Giv	ve Details About Special Circumstances		
		/e any special circumstances that justify additional expere alternative? 11 U.S.C. § 707(b)(2)(B).	nses or adjustme	ents of current monthly income for which there is no
i cas	Ullable	*allernative: 11 0.3.6. § 707(b)(2)(b).		
	lo. Go	o to Part 5.		
		I in the following information. All figures should reflect your ave ou may include expenses you listed in line 25.	erage monthly expe	ense or income adjustment for each item.
	ne	ou must give a detailed explanation of the special circumstance cessary and reasonable. You must also give your case trustee justments.		
	G	live a detailed explanation of the special circumstances		Average monthly expense or income adjustment
	_			\$
	_			\$
	_			\$
	_			\$
Part 5:	Sig	ın Below		
	By si	gning here, I declare under penalty of perjury that the information	on on this stateme	ent and in any attachments is true and correct.
	X /s	/ Robert P Manzo	X /s/ Grace	C Manzo
		obert P Manzo gnature of Debtor 1	Grace C Signature of	Manzo
Da		•	Date June 24,	
٠,		M / DD / YYYY	MM / DD /	

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	_
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to:
<a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx</a>

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 1-16-42819-cec Doc 1 Filed 06/25/16 Entered 06/25/16 20:59:40

B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Eastern District of New York

In re	Manzo, Robert P & Manzo, Grace C		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMP	ENSATION OF ATTO	ORNEY FOR I	EBTOR	
(	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20. compensation paid to me within one year before the fil be rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy	y, or agreed to be pai	d to me, for services re	
	For legal services, I have agreed to accept		\$	2,750.00	
	Prior to the filing of this statement I have received	1	\$	2,750.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed comfirm.	npensation with any other person	n unless they are mer	nbers and associates of	my law
	☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the name of the agreement.				aw firm. A
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspec	cts of the bankruptcy	case, including:	
l	a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, sta c. Representation of the debtor at the meeting of credi d. [Other provisions as needed]	atement of affairs and plan whic	ch may be required;	-	ruptcy;
6. l	By agreement with the debtor(s), the above-disclosed f	ee does not include the following	ng service:		
		CERTIFICATION			
	I certify that the foregoing is a complete statement of a nankruptcy proceeding.	iny agreement or arrangement fo	or payment to me for	representation of the d	ebtor(s) in
_ <u>J</u> ı	une 24, 2016	/s/ Kevin Zazzera	1		
Date		Kevin Zazzera Signature of Attorna Kevin B. Zazzera			
		182 Rose Ave St Staten Island, N			
		kzazz007@yahoo Name of law firm	o.com		_